



## KIMBILIO DAIMA SACCO SCHOLARSHIP FORM 2026

Kimbilio Daima Sacco Scholarship is designed to help bright but financially challenged students in meeting their school fees. Successful applicants will be required to keep good grades in Senior Secondary School. Kimbilio Daima Sacco Scholarship is limited to students within the SACCO catchment areas who meet the application criteria detailed below.

To be eligible for consideration, the applicant must:

- Be a Kenyan citizen.
- Have sat for the Grade 9 (Kenya Junior School Education Assessment) in 2025 at a Public Junior school that is recognized by the Ministry of Education in Kenya.
- Have scored a cumulative average of 65 points Meeting expectation 2 and above
- Be a boy or girl from a needy family.

Interested students should fill and submit the SACCO Scholarship Application Form and provide:

- A certified copy of Kenya Junior School Education Assessment (KJSEA) result slip
- Relevant recommendation letters as outlined in the application form.
- Copy of birth certificate.
- Copy of Senior School Admission letter/joining instructions where applicable.
- Evidence of being an orphan where applicable.

This application must be completely filled in, and directions clearly followed before it will be considered. Incomplete form or forms containing false information will be rejected. Provide the required information in the space provided only. Use either English or Kiswahili.

Please fill this application and submit a hardcopy to the Chief Executive Officer at Kimbilio Daima Sacco - Kapset.

The student's parent, guardian, or sponsor should complete all of the relevant parts and provide supporting evidence where necessary (e.g., proof of income, death certificate etc.). All parts of the form must be submitted to C.E.O with supporting documentation not later than **Tuesday 6th January 2026**. Late applications will not be considered.

### PART 1- PERSONAL INFORMATION

**Name:**

Surname: ..... First name: ..... Middle: .....

Date of Birth:  Gender: Male ☐ Female ☐

Postal Address: ..... E-mail: .....

Physical Address: County: ..... Constituency: .....

Phone

## PART 2- EDUCATION INFORMATION

KJSEA points:

Year

Name of Junior School: .....

Postal Address.....

Head Master/Mistress: .....

Indicate pathways chosen for Senior School and provide weighting for each pathways as per KJSEA results

Pathway..... Weighting:.....

## PART 3- FAMILY INFORMATION

### Father's / Guardian's Name:

Surname: .....First name: .....Age: .....

### Mother's / Guardian's Name:

Surname: .....First name: ..... Middle... .....Age: .....

Are your parents: Married ☐ Single ☐ Divorced ☐ Widowed ☐

Mother alive? Yes / No Father alive? Yes/ No

How many siblings (brothers and sisters) do you have?  Are you the 1st, 2nd... born?

Father's / guardian's Highest Level of Education (Write none if no education):

.....

Father's / Guardian's Occupation:

Businessperson ☐ Retired ☐ Farmer ☐ Unskilled ☐

Professional ☐ Other, Specify .....

Name & Address of Father's / Guardian's Employer or Last Employer (if applicable):

.....

Mother's / Guardian's Highest Level of Education ((Write none if no education)

.....

Mother's / Guardian's Occupation:

Businessperson ☐ Retired ☐ Farmer ☐ Unskilled ☐

Professional ☐ Other, Specify .....

Name & Address of Mother's / Guardian's Employer or Last Employer (if applicable):

.....

#### PART 4- PARENT'S FINANCIAL INFORMATION

Parents' (both) monthly salary: Kshs

Grower number  .....

##### Family Budget

	Amount in Ksh.
<b>Income per Month</b>	
Father's salary/ business	
Mother's Salary/ business	
Tea earnings	
Other source	
<b>Total Income</b>	

<b>Expenditure per month</b>	
Food, clothing etc	
House rent	
School fees for children (Per term)	
Loans	
Other	
<b>Total Expenditure</b>	

What is your total need for which you are requesting assistance? Kshs

Have you applied for financial assistance in the past? (Give evidence)

CDF Assistance? Yes/ No ☐ ☐

Other Scholarships? Yes/ No ☐ ☐

If yes Please state which one(s) and amount.....

## PART 5- PERSONAL STATEMENT

State briefly why you should be considered for this scholarship

### Applicant declaration:

I, ..... Confirm that all of the information  
aforementioned is true and correct. I accept responsibility for any information found to be false/  
misleading. I authorize SACCO to obtain further information; and to use and release information regarding  
my application to the scholarship program to parties that may be relevant and of benefit to my education.

Signature: Date.....

### Parent/Guardian declaration:

I, .....confirm that all of the information  
aforementioned is true and correct. I accept responsibility for any information found to be false /  
misleading. I authorize SACCO to obtain further information; and to use and release information regarding  
my child's application to the scholarship program, to parties that may be relevant and of benefit to my  
child's education.

Signature.....

Date.....

Name: ..... ID No.....

Relationship to applicant (father, mother, guardian etc.) .....

Address:.....Telephone: .....

### Head teacher

I have known the applicant for..... Years. I wish to confirm that to the best of my knowledge,  
information given in this application is correct and true.

Name: ..... ID No.....

Title: .....

Address: .....

Telephone: .....

Signature and Stamp: .....

## **PART 6- FOR OFFICIAL USE ONLY**

Approved: Yes ☐ No ☐

Name of selection committee chairman.....

Signature: .....