## ZAWADI AFRICA EDUCATIONAL FUND



#### **IMPORTANT TO NOTE:**

- I. Please note that submission of application for consideration under the Zawadi Educational Fund **DOES NOT** guarantee the applicant award of any scholarship or admission to any university. The Admission decision is entirely dependent on the Universities' Admission Boards.
- II. Applicants are responsible for <u>100%</u> of the costs related to this application. Zawadi Africa Educational Fund is not liable for any costs you will incur while applying for this application.
- III. Zawadi Africa <u>DOES NOT</u> charge any fees for this application neither has it contracted any company or agency or individual to undertake the application review process on its behalf. The application process for Zawadi Africa Educational Fund is handled solely by Zawadi Africa country office staff.
- IV. ONLY short listed candidates will be called for an interview a month after the deadline of this application.

# Application Deadline: March 31<sup>ST</sup> 2017

#### PART I: APPLICATION CRITERIA AND INSTRUCTIONS:

#### I. Required Qualifications:

- 1. A girl who has completed her secondary school examination [i.e. The Kenya Certificate of Secondary Examination (KCSE) within the last two years (2015 and 2016)].
- 2. Has demonstrated <u>academic excellence</u> (A Plain or A- KCSE scores that will be subject to verification).
- 3. Has <u>demonstrated leadership</u> qualities e.g. in school as a prefect, in the community, church, leadership in peer related activities etc.)
- 4. Has <u>overcome insurmountable odds</u> such as serious financial challenges, oppressive social-cultural practices such as early marriages and Female Genital Mutilation (FGM) etc. in order to attain academic excellence.
- 5. Has demonstrated a clear financial need.

#### **II. Instructions**

- 1. If you meet the above criteria, ensure that you complete every part of this application form. Your application will only be considered if it completely filled.
- Attach a <u>one page biography</u> and a <u>passport photo</u>. The biography should be <u>TYPED</u> and highlight your family and educational background, your aspirations, financial status, as well as hobbies and activities that you have undertaken while in school and in your community.
- 3. Attach a 500-650 word essay on **ONLY ONE** of three topics listed on page seven.
- 4. Attach a copy of your high school leaving certificate and K.C.S.E result slip as well as copies of high school certificates that show your involvement in extracurricular activities and leadership related initiatives.
- 5. Attach a signed recommendation letter from your class teacher or head teacher.
- 6. Attach a copy of your birth certificate and your National Identity Card (if you have one).
- 7. Attach a letter from your local chief confirming his knowledge of your family and yourself. The letter should preferably be written on a government letter headed document.
- 8. Any false statements, omissions or forged documents will lead to automatic disqualification.
- 9. Submit a <u>Hard Copy</u> of this application form and the required supporting documents <u>on or before</u> the deadline (31st March, 2017) through either:

#### Mail:

To the Program Manager, Zawadi Africa Educational Fund, P.O. Box 59949-00200, Nairobi, Kenya. Drop it at the Zawadi Africa Offices located along:

Lenana Road, Kilimani Cathy Flats, Suite No. 4 (Close to the Chinese Embassy) Nairobi, Kenya

## **PART II: APPLICANT'S DETAILS**

## I. Student's Information.

| First Name:                | Middle Name:          | Surname:                |           |
|----------------------------|-----------------------|-------------------------|-----------|
| Date of Birth:             | M Y Y Y               |                         |           |
| Postal Address: P.O. Box   |                       |                         |           |
| Physical Address:          |                       |                         |           |
| Country:                   | County (If applicable | e):City/Town:           |           |
| Telephone Number:          |                       |                         |           |
| Alternative Tel. Number:   |                       |                         | ]         |
| Email Address:             |                       |                         |           |
| Name of High School:       |                       | Completion date:        | M Y Y Y Y |
| KCSE Index Number:         |                       |                         |           |
| KCSE Grade:                |                       |                         |           |
| Mock grade in High schoo   | ıl:                   |                         |           |
| Desired course of study in | College:              |                         |           |
| 1 <sup>st</sup> (          | choice                |                         |           |
| 2 <sup>nd</sup>            | choice                |                         |           |
|                            |                       |                         |           |
| Do you have a child? Yo    | es[] No[]. If YES     | , how old is the child? |           |

# II. Family Background.

| <u>Mother</u> |                 |       |                                                                |
|---------------|-----------------|-------|----------------------------------------------------------------|
| Name:         |                 |       | Telephone no                                                   |
| National I.D  | ).              |       |                                                                |
| Living        | Deceased        |       | (If deceased please attach a copy of death/burial certificate) |
| Marital Sta   | tus:            |       | Level of education                                             |
| Occupation    | :               |       |                                                                |
| <u>Father</u> |                 |       |                                                                |
| Name:         |                 |       | Telephone no                                                   |
| National I.C  | ).              |       |                                                                |
| Living        | Deceased        |       | (If deceased please attach a copy of death/burial certificate) |
|               |                 |       | Level of education                                             |
| Occupation    | :               |       |                                                                |
| Guardian (I   | f not living wi | th pa | rents):                                                        |
| Name:         |                 |       | Telephone no                                                   |
| National I.D  | ). L            |       |                                                                |
| Marital Stat  | tus:            |       | Level of education                                             |
| Occupation    | :               |       |                                                                |
| C: - :        |                 |       |                                                                |

### **Sibling Information:**

List all the applicant's brothers and sisters who are still in school and provide the details required below:

| No. | Full Name | Age | Year in<br>school/college | Fees per<br>Year | Scholarships<br>or Bursary<br>per year | Amount of parents/guardian's contribution per year |
|-----|-----------|-----|---------------------------|------------------|----------------------------------------|----------------------------------------------------|
| 1.  |           |     |                           |                  |                                        |                                                    |
| 2.  |           |     |                           |                  |                                        |                                                    |
| 3.  |           |     |                           |                  |                                        |                                                    |
| 4.  |           |     |                           |                  |                                        |                                                    |
| 5.  |           |     |                           |                  |                                        |                                                    |
| 6.  |           |     |                           |                  |                                        |                                                    |
| 7.  |           |     |                           |                  |                                        |                                                    |
| 8.  |           |     |                           |                  |                                        |                                                    |

# **III. Family Asset Information**

a)

| Indicator                                                                                                        | Father/Male Guardian                | Mother/Female Guardia  |
|------------------------------------------------------------------------------------------------------------------|-------------------------------------|------------------------|
| Age                                                                                                              |                                     |                        |
| Are your parents/guardians employed?                                                                             |                                     |                        |
| (If employed, give details of job and                                                                            |                                     |                        |
| salary/per month. Attach pay slip).                                                                              |                                     |                        |
| If your parents own a business, how much is                                                                      |                                     |                        |
| the average monthly income? (attach bank                                                                         |                                     |                        |
| statement)                                                                                                       |                                     |                        |
| <ul><li>b) Does your family own land? Yes [ ] No [</li><li>c) Does your family own a car? Yes [ ] No [</li></ul> | -                                   |                        |
| c) Does your failing own a care rest of Not                                                                      | J                                   |                        |
| d) Has your family been affected by civil conf                                                                   | lict or natural disasters such as o | displacement flooding, |
| drought, fire, or famine? Describe:                                                                              |                                     |                        |
|                                                                                                                  |                                     |                        |
|                                                                                                                  |                                     |                        |
| e) Describe any other information you wo                                                                         | uld like to provide under this sec  | ction:                 |
|                                                                                                                  |                                     |                        |
|                                                                                                                  |                                     |                        |

## **IV. Expenses**

1. How much does your family spend on the following in a month?

| Expense:             | Local Currency (KSH) |
|----------------------|----------------------|
| Rent/Mortgage        |                      |
| Food                 |                      |
| Clothing             |                      |
| Educational Expenses |                      |
| Loan repayment       |                      |
| Entertainment        |                      |

2. In the absence of our program, how would you pay for the following if granted a scholarship by a university of your choice?

| Cost:                | Estimated Cost | Means of acquiring: |
|----------------------|----------------|---------------------|
| Air ticket (one way) | \$900-1300     |                     |
| Visa Fee             | \$200          |                     |
| SEVIS Fee            | \$160          |                     |
| Passport             | \$50           |                     |
| Books                | \$300          |                     |
| Pocket money         | \$300          |                     |
| Medical insurance    | \$400          |                     |

## **PART V: DECLARATIONS**

| Applicant's Declaration:                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| my knowledge and I am aware that giving fall<br>considered and will lead to automatic disqualif<br>such additional information concerning my pe<br>this application. I also authorize Zawadi Africa<br>to others who are involved in making decision | eclare that the information given above is true to the best of se representation will mean that my application will not be fication. I authorize Zawadi Africa Educational Fund to obtain ersonal, academic and financial records needed to complete a Educational Fund to communicate and release information as relating to my educational plans including and not limited amed in this form, and the Ministry of Education, Science and |
|                                                                                                                                                                                                                                                      | nderstand that Zawadi Africa Educational Fund reserves the fit should any of the information above be found to be                                                                                                                                                                                                                                                                                                                          |
| Signature:                                                                                                                                                                                                                                           | Date: D D M M Y Y Y Y                                                                                                                                                                                                                                                                                                                                                                                                                      |
| Parent's/Guardian's Declaration:                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| representation in this application will lead to a Zawadi Africa Educational Fund to obtain add academic records, as well as the family's fina authorize Zawadi Africa Educational Fund to involved in making decisions relating to the a             | the best of my knowledge and I am aware that giving false automatic disqualification. On behalf of my child, I authorized litional information concerning the applicant's personal and incial records as needed to complete this application. I also communicate and release information to others who are applicant's personal and educational plans including and not be family's financial background, as well as referees named in     |
| Parent/Guardian Name:                                                                                                                                                                                                                                | Date: D D M M Y Y Y Y                                                                                                                                                                                                                                                                                                                                                                                                                      |
| Signature:                                                                                                                                                                                                                                           | _                                                                                                                                                                                                                                                                                                                                                                                                                                          |

## V. References:

| 1. Head teacher of the last se | econdary school you last attended:         |  |
|--------------------------------|--------------------------------------------|--|
| Name:                          | Telephone:                                 |  |
| For how long has this referen  | ce known you, the applicant?               |  |
| 2. Referee (Religious leader)  | :                                          |  |
| Name:                          | Telephone:                                 |  |
| Address:                       |                                            |  |
|                                | n the applicant?                           |  |
| Signature and Stamp            |                                            |  |
| 3. Referee (A person who kn    | ows you well but not a relative):          |  |
| Name:                          | Email Address:                             |  |
| Telephone:                     | For how long have you known the Applicant? |  |

## **PART III. Essay:**

The following essay prompts are from the CommonApp 2015-2016 application period, please choose one of the below questions and write between 500-650 words on **ONLY ONE** of the following questions:

- 1. Some students have a background, identity, interest, or talent that is so meaningful they believe their application would be incomplete without it. If this sounds like you, then please share your story.
- 2. Reflect on a time when you challenged a belief or idea. What prompted you to act? Would you make the same decision again?
- 3. Describe a problem you've solved or a problem you'd like to solve. It can be an intellectual challenge, a research query, an ethical dilemma-anything that is of personal importance, no matter the scale. Explain its significance to you and what steps you took or could be taken to identify a solution.