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**AGA KHAN UNIVERSITY**

**FI NA NCIAL ASS IS TANCE APPLIC AT ION FORM**

Attach recent colour passport size photograph.

**INSTRUCTIONS**

**Read the instructions carefully before filling in the form.**

IT IS THE APPLICANT’S RESPONSIBILITY TO SUBMIT A COMPLETE, FULLY SUPPORTED APPLICATION

* Fill in BLOCK letters. Use extra sheets for any additional information.
* The application **MUST** be supported with a personal profile by the applicant with details on why they are applying for financial assistance, career aspirations, justification for financial assistance supported by suitable references and/or testimonials and recommendations from previous institution, religious leader or Chief and any other relevant information.
* The financial assistance program is aimed to assist genuinely needy students who are unable to meet their financial obligation. It should be realized that a limited amount is available for helping the students and therefore **serious efforts should be made to raise funds (loans and scholarships) from all other sources before applying to the Aga Khan University for financial assistance. Documents to support fundraising efforts should be included and details of any other financial support should be submitted.**
* Copies of ALL DOCUMENTS required must be provided by the applicant. Any applications without relevant supporting documents will be rejected.
* The completion and submission of this form is not a guarantee for financial assistance.
* The University reserves the right to verify the information and evidence provided by the student.

Providing incorrect, exaggerated, false and/or concealing information will result in denial of financial assistance and/or strict disciplinary action against the applicant.

* Submit the application forms and supporting documents in a sealed envelope not later than

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_to the Student Finance Office (***University Centre, Ground Floor***) or through email: AKUKenya.students@aku.edu

**SECTION 1: APPLICANT’S INFORMATION**

Student Full Names: **\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_ \_**

Academic Program: BScNMBChBStudent Number: \_\_

Date of Birth: Gender: \_\_\_\_\_\_\_\_\_ \_\_\_\_ Marital status:

National ID/Passport No.:

Address: Postal

 Telephone Number

Email Address

 Physical Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_

**SECTION 2: - FAMILY SOCIAL AND ECONOMIC INFORMATION**

**Please attach support documentation for the Parents/Guardian including:**

* 3 month’s Payslips if employed
* Bank statements for the last 6 months
* Mpesa statements for the last 6 months
* Any other relevant documentation.

**Father’s Details**

Father’s Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Living: Deceased (**If deceased attach copy of death/burial certificate )**

ID NO: Telephone/Mobile Number:

Physical Address: County: Sub – County:

Ward: Location: Sub- Location:

Postal Address: P.O BOX: Town/City: Postal Code:

Father’s Occupation (Please fill the appropriate columns)

|  |  |  |
| --- | --- | --- |
| Employment Details | Name of Organization |   |
| Designation |   | Duration of Service |   |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Business | Nature of Business |   | Duration of Business |   |

**Mother’s Details**

Mother’s Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Living: Deceased (**If deceased attach copy of death/burial certificate)**

ID NO: Telephone/Mobile Number:

Physical Address: County: Sub – County:

Ward: Location: Sub- Location:

Postal Address: P.O BOX: Town/City: Postal Code:

Mother’s Occupation (Please fill the appropriate columns)

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| --- | --- | --- |
| Employment Details | Name of Organization |   |
| Designation |   | Duration of Service |   |
| Business | Nature of Business |   | Duration of Business |   |

 **Guardian’s Details**

Guardian’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_ Relationship with Applicant

ID NO: Telephone/Mobile Number:

Physical Address: County: Sub – County:

Ward: Location: Sub- Location:

Postal Address: P.O BOX: Town/City: Postal Code:

Guardian’s Occupation (Please fill the appropriate columns)

|  |  |  |
| --- | --- | --- |
| Employment Details | Name of Organization |   |
| Designation |   | Duration of Service |   |

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| --- | --- | --- | --- | --- |
| Business | Nature of Business |   | Duration of Business |   |

**Siblings Information**

List all your brothers and sisters starting with the oldest and state what each one is doing. (If working, describe job and monthly salary. If in university, state it. If in school, state the form or class. If in training, describe it.

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| --- | --- | --- | --- | --- |
|  | **Name** | **Age** | **School/Employer** | **Class/Position in Employment** |
| 1 |   |   |   |   |
| 2 |   |   |   |   |
| 3 |   |   |   |   |
| 4 |   |   |   |   |
| 5 |   |   |   |   |
| 6 |   |   |   |   |
| 7 |   |   |   |   |
| 8 |   |   |   |   |

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 Who do you live with? Parents: Guardians: Other (Specify)

Status of Residence

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 Family Owned Rented Other (Specify)

Assets owned by the Parents/Guardian

Land Size in Acres: Vehicles:

Businesses owned, Number of Livestock etc.:

**SECTION 3: -FAMILY INCOMES, EXPENDITURES AND LIABILITIES**

 **Annual Family Income**

**Details Of Annual Family Income in Kenya shillings (Please indicate income of all family members):**

(Non-Residential Students are requested to state income and expenses in USD)

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| **Relationship With Applicant e.g., Father, brother etc.** |
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1. **Income from Salary**

 Gross Annual Salary

 Add: Annual bonus

 Others-Specify

 **Total income from salary**

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1. **Pension-Annual**

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1. **Business/professional**

**Annual income**

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| --- | --- | --- | --- |
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1. **Agricultural Annual income**
2. **Other Incomes**

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| --- | --- | --- | --- |
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**Annual rental income**

**From Investments**

**Others-specify**

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| --- | --- | --- | --- |
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**Total Annual Income**

 **(a+b+c+d+e)**

**Annual Family Expenditure**

**Details of Annual Family Expenditures** (Please provide appropriate evidence for expenses incurred where applicable)

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1. **Household expenses**

 House rent

 Utilities-Gas, Electricity etc.

 Food and Groceries

 Transport

 Clothing

 Medical expenses

 Travel

 Entertainment

 Servants- (cooks, house helps, drivers, gardeners,guards etc.)

 **Total Household expenses**

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| --- | --- | --- |
| **Studying in Kenya** | **Studying abroad** | **Total-Kes** |
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1. **Educational Expenses**

 Tuition and other fees

 Boarding and accommodation

 Private tuition

 Books/stationary/others

 **Total**

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1. **Other Expenses (Please specify)**

 **Total-Other expenses**

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 **Total Annual Expenses (a+b+c)**

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 **Surplus/Deficit**

**Total Annual Incomes**

 **Total Annual Expenditure**

 **Surplus/Deficit**

 In case of deficit, please specify how the deficit was managed last year?

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**Family’s Liabilities**

Please provide details of loan taken from financial institutions / family/ friends (use extra sheet if required)

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| --- | --- | --- | --- | --- | --- |
| **Name of Bank/Institution** | **Purpose of Loan** | **Date loan availed** | **Loan amount** | **Annual Repayment Amount** | **Outstanding****Balance** |
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**SECTION 4: FINANCIAL ARRANGEMENT**

**Agencies/entities approached for financial assistance (banks/parent/guardian/spouse/employers etc.)**

**Please provide proof of application**

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| --- | --- | --- |
| **Agency/person** | **Amount applied for** | **Outcome** |
| 1. |  |  |
| 2. |  |  |
| 3. |  |  |

**What other alternative arrangements have been made for financing your educational expenses at**

**AKU?**

**SECTION 5: RECOMMENDATIONS**

This part must be completed by the relevant authorities indicated. Any false information will lead to disqualification

**Chief or Assistant Chief, Religious leader or principal of former school.**

How long have you known the candidate/family?

Rate the candidate’s financial ability:

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Very Rich: Rich: Middle Income: Poor: Very Poor:

Additional Information:

Name: Date:

Signature and official stamp:

**SECTION 5: UNDERTAKING**

a) I understand that it is my obligation as a student of Aga Khan University to meet all my financial obligations as at the time of application for studentship at the University;

I certify that the information provided above is true to my knowledge. Should any information given be proved to be incorrect, it will result in a disciplinary action or dismissal from the programme.

Signature of applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

b) I understand that submission of this application does not guarantee award of financial assistance nor does it absolve me of any financial responsibility in relation to study at AKU.

c) The information given in this application is complete and true to the best of my knowledge. I understand that concealing/falsifying or concealing any information or providing any incorrect information will result in denial of financial assistance and may also result in strict disciplinary action.

d) I agree to abide by the decision of the Financial Assistance Committee

**Note: The Decision of the by the Financial Assistance Committee is final.**

**Signature of Applicant: Date:**

**Signature of Parents/Guardian: Date:**

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