

UNIVERSITY SCHOLARSHIPS FOR 2023

- ✓ The Finlays Community Trust (FCT), a trust created by James Finlay (K) Limited to drive its Corporate Social Responsibility programme, invites bright and needy students who may not afford University education to apply for university scholarship for the year 2023 in any Kenyan Public University. There are twenty-eight scholarships to be awarded this year.
- ✓ This scholarship is open to residents of Bomet and Kericho Counties admitted to take any academic course in a University in Kenya under Government Sponsored Students.
- ✓ Criteria for selection is academic excellence and financial need of the applicant.
- ✓ Eligible students for the FCT 2023 University Scholarship are those who sat the Kenya Certificate of Secondary Examination (KCSE) 2022 and attained a minimum grade of B+ and above.
- ✓ Interested students who wish to apply for the scholarship will need to submit the following documents: -
 - (i) Certified copies of: -
 - (a) 2022 KCSE results' slip
 - (b) Secondary school leaving certificate
 - (ii) Duly filled application form (incomplete forms will not be considered)
 - (iii) Copy of the letter of admission to a Public University.
- ✓ Canvassing will lead to automatic disqualification.
- ✓ Applications should reach us not later than **21st August 2023** and should be addressed to: -

The Chairman
Finlays Community Trust
P.O. Box 223-20200
Kericho
E-mail: communitytrust@finlays.co.ke

- ✓ Only shortlisted and successful candidates will be contacted. Applicants who will not have heard from us by **8th September 2023** should consider themselves unsuccessful.
- ✓ FCT reserves the right to accept or reject any application and is not obliged to give any reason(s) thereof.



Secretary
Finlays Community Trust

UNIVERSITY SCHOLARSHIP FOR 2023
(Application Form)

Instructions to the Applicant

- (i) Applicants must have sat for KCSE for the year 2022.
- (ii) Applicants must have attained a minimum mean grade of B+ and above.
- (iii) Applicants must attach a copy of the admission letter from the University to pursue a degree course.
- (iv) Applicants must be residents of Bomet or Kericho County.
- (v) Eligibility criteria is as follows: -
 - (a) Academic performance
 - (b) Background economic information and/or evidence of financial challenges
 - (c) Persons living with disabilities will be considered
 - (d) Recommendation from recognized charitable institutions or organizations
 - (e) Other confirmed sponsorships to the applicant

The Trust will use mechanisms at its disposal to confirm and/or verify any information given by the applicant. Please therefore note that any false information provided by either the applicant or the person recommending will lead to automatic disqualification.

SECTION A (To be filled by student)

Name _____ ID/Passport/Birth Certificate No. _____ (attach copies)
 Secondary School Attended _____ Mean Score: Grade _____ Points _____
 Age in years _____ Sex _____ (M or F) Marital Status _____ (married or single)
 Physically Challenged _____ (Yes or No). If Yes, specify the challenge _____
 Postal Address _____ Cell Phone No. _____ Email _____
 County _____ Sub-County (Constituency) _____
 Ward/Location _____ Sub-Location _____
 Village Name _____ Village Administrator/Elder Name _____
 Village Administrator/Elder cell phone No. _____
 Degree Course _____ University _____
 Signature _____ Date _____

SECTION B (To be filled by Parent or Guardian)

Name _____ ID No. _____ Cell Phone No. _____
 County _____ Ward/Location _____ Sub-Location _____
 Occupation _____ Postal Address _____
 Relationship with student (Parent or Guardian) _____
 Indicate number of your children who have in the past benefited from any Finlays Scholarship _____

Briefly justify need for assistance

Signature _____ Date _____

SECTION C (To be filled by Assistant Chief or Chief)

Name _____ Designation _____
 Sub-Location _____ Location _____
 Postal Address _____ Cell Phone No. _____

Briefly provide information about the student and the guardian to include the length of time you have known them, their character, neediness; etc.

Signature _____ Date _____ Stamp _____

SECTION D (To be filled by a Religious Minister)

This is to certify that I have known _____ (student's name)
 and _____ (parent/guardian's name) for a period of _____ years
 and that the applicant is needy/not needy (delete whichever is not applicable).

Justification for financial assistance or otherwise

Name of Religious Minister _____ Denomination _____
 Designation _____ Address _____
 Cell Phone No. _____ Signature _____
 Stamp _____

SECTION E (For Official Use Only)

Application Received on _____ (Date)

Overall Interview Results (Awarded/Not Awarded)
