



UNIVERSITY SCHOLARSHIPS FOR 2024

- ✓ The Finlays Community Trust (FCT), a trust created by Browns Plantations Kenya Limited (Formerly 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 2024 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 Sponsorship/Regular Program.
- ✓ Criteria for selection is academic excellence and financial need of the applicant.
- ✓ Eligible students for the FCT 2024 University Scholarship are those who sat the Kenya Certificate of Secondary Examination (KCSE) in 2023 and attained a minimum grade of B+ and above. Students with less than 70 points **need not apply**.
- ✓ Interested students who wish to apply for the scholarship will need to submit the following documents:-
 - (i) Copies of: -
 - (a) 2023 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 **24th June 2024** and should be addressed to: -

The Chairman
Finlays Community Trust
P.O. Box 223-20200
Kericho
E-mail: communitytrust@brownsplantations.co.ke
- ✓ Only shortlisted and successful candidates will be contacted. Applicants who will not have heard from us by **30th August 2024** 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 2024
(Application Form)**

Instructions to the Applicant

- (i) Applicants must have sat for KCSE in the year 2023.
- (ii) Applicants must have attained a minimum mean grade of B+ (70 points) 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) Recommendation from recognized charitable institutions or organizations.
 - (d) Other confirmed sponsorships to the applicant.
 - (e) Females and PLWD are encouraged to apply.

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)

[Handwritten Signature]
6/16/24