



FINANCIAL ASSISTANCE APPLICATION FORM,

ISLAMIC UNIVERSITY OF KENYA -Kisumu Campus

Applicant Name _____ Gender _____ Program/Year: _____

Registration No. _____ Date of Birth: _____ Cell Phone No. _____

County: _____ Nationality _____ E-mail address: _____

Reason for Request (Briefly explain why you need financial assistance):

Permanent home address _____

Temporary Home Address: _____

Is the student currently attending/enrolled IUK? (Circle one) YES/NO _____

Is the student admitted but not yet attending? (Circle one) YES/NO _____

Father / Guardian Name: _____ Occupation _____

Father/Guardian Phone No: _____ Total Monthly Income (Father/Guardian + Mother): _____

Total Monthly Household Expense _____

List of Sibling (Brother/Sister)

	Name	Age	detail of (Education/job/Jobless/at home)
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____

Attach Supporting Documents (Father/Guardian Pay slip, Attach proof of rental residence (e.g. agreements or receipts), Copy electricity bill, Copies of ID-Applicant and Father).

Declaration

I certify that the information provided in this application is accurate and complete to the best of my knowledge. I understand that providing false information may result in disqualification from financial assistance.

Applicant (Signature): _____

Date: _____

(For Office Use)

Financial Assistance (in %) _____ Financial Assistance (in Ksh.): _____

Remarks _____ Reviewed/Recommended By (signature) _____

Remarks _____ Approved by (signature) _____

Date _____