

## **Request for Financial Aid - Daystar University**

Daystar University financial aid awards are designed to help students who are financially challenged in meeting their school fees. Successful applicants will be required to work at least ten hours per week throughout the 34 weeks of the regular academic year no matter what the size the award. Note that the amount of the work-study aid is based on the actual hours worked.

Daystar University financial aid is open to all students to apply but the funds are limited to those students who may be unable to meet their school fees in any other way. Note: no financial aid will be given to any student who has not applied for a loan or bursary from the Higher Education Loans Board (HELB). It does not matter that your application was denied, but you must have applied.

Preference in allocating financial aid grants will be given to those who:

- a) Are enrolled full-time (at least 12 credit hours).
- b) Possess above average academic achievement (at least 2.5 cum GPA).
- c) Demonstrate mature behavior in all areas of university life.
- d) Have a demonstrated financial need.
- e) Are closer to completing the program.
- f) Exhibit a strong Christian involvement.

This application must be completely filled in, and directions clearly followed before it will be considered. Incomplete forms or forms containing false information will be rejected. Type your answers in the text boxes in the form Use proper English; spelling, grammar and punctuation.

Please fill this application and submit a hardcopy to the Financial Aid Office. Save or print a copy for yourself, should you need to refer to it.

The student's parent, guardian, or sponsor should complete all of the relevant parts. These may be submitted as a hard copy if necessary. All parts of the form must be submitted to the Financial Aid Office with collaborating documentation not later than the deadline set for the coming year. Normally this is by the end of January. Any late applications will not be considered.

In the application form, "click" inside the boxes to insert a cursor to enter the relevant information. To "tick" the box use an "X". Otherwise, type in the required data.



FINANCIAL AID APPLICATION

Name [ ] [ ] [ ] Date: [ ]
Surname, First name, Middle (yyyy/mm/dd)

Admission No. [ ]

Postal Address [ ]

Phone [ ] E-mail [ ]

Part 1- Personal Information

Gender: [ ] male [ ] female Date of Birth [ ] (yyyy/mm/dd)

Nationality [ ] Home City [ ]

Program enrolled in: [ ] Diploma Major [ ] [ ] Undergraduate (day) Concentration (if any) [ ] [ ] Undergraduate (evening) Minor (if any) [ ] [ ] Postgraduate

Credit Hours: Completed to date [ ] Coming year [ ] Cum GPA [ ]

Marital Status:

[ ] Single [ ] Widowed [ ] Married [ ] Separated [ ] Spouse's name [ ] Divorced

Children (if applicable):

Name [ ] [ ] [ ] ages [ ] [ ] [ ] gender (M or F) [ ] [ ] [ ]

Would your family be living with you while attending Daystar? [ ] Yes [ ] No

**Family information: living late unsure**

**Mother** (tick one):

**Father** (tick one):

If you have only one parent active in your life (or ticked "unsure" above) please explain the circumstances.

How many siblings do you have?

What is your birth order?

**Father's (or spouse's, if married) Highest Level of Education:**

None       Primary       Diploma  
 Bachelors       High School       Postgraduate

**Father's (or spouse's, if married) Occupation:**

Businessperson       Retired       Farmer       Unskilled  
 Professional       Other, Specify

**Mother's (or spouse's, if married) Highest Level of Education:**

None       Primary       Diploma  
 Bachelors       High School       Postgraduate

**Mother's (or spouse's, if married) Occupation:**

Businessperson       Retired       Farmer       Unskilled  
 Professional       Other, Specify

**Name & Address of Parent's (or spouse's) Employer or Last Employer (if applicable):**

**Name & Address of Your Employer or Last Employer (if applicable):**

Part time

Full time

**Parent's (both) or spouses monthly salary**

KES

**Church Denomination:**

**Parish or Local Church:**

**Pastor, Minister, Priest, or Bishop's name:**

**His or Her Position or Title:**

**How long have you been attending this church?**

**State briefly your activities in this church:**

**State your Current Place of Residence:**

(This section is applicable to refugees only)

**Refugee Status:**

**UNHCR registration number:**

**Date of arrival in the refugee camp**

**Name of Camp):**

**Have you applied for relocation abroad?**

Yes

No

***Educational Background***

Tick any of the following that apply:

University

College

Vocational training -

**Name of the institution:**

**Field of Study:**

**Year of Study:**

**High School**

**Name of the School:**

**Years of study: From**

to

**KCSE (or equivalent) Final Mean Grade:**

**Part 2 – Financial Assessments**

Please fill in your estimated costs for the coming academic year starting in August. Double click in the table below to enter your cost.

Item	Typical Amount for two terms	Your Cost
Tuition fees (18 hrs)	193,716	
Room (Hostel)	32,104	
Board (Cafeteria)	59,967	
Medical	15,070	
Examination	2,500	
Student Activity	2,000	
Technology	6,000	
Library	4,000	
Printing	400	
Practicum		
<b>TOTAL (A)</b>	<b>315,757</b>	<b>-</b>

**Current outstanding balance (if any):** (B) KES

**Funding Sources to be applied to your school fees (indicate the amount from each source)**

Other sources	KES	Personal Resources	KES
Parents		Your salary or business	
Guardians		Spouse's salary or business	
Brothers or sisters		Savings	
Sponsor		Harambee	
Other scholarships		Other	
Church			
HELB, MoE, CDF			
<b>SUB-TOTALS</b>	<b>0</b>		<b>0</b>
<b>GRAND TOTAL RESOURCES (C)</b>	<b>0</b>		

**What is your total need for which you are requesting assistance? (A + B – C)**  KES

**What is your total family (both of your parents) annual income from all of the sources indicated below:**

**Wages or salaries**

**Business**

**Farming**

List your family's total obligations:

school fees for siblings

rent (or mortgage)

utilities

transport

medical, including food.   
household expenses

**How long have you been applying for a scholarship at Daystar University?**

**Three Years**    **Two years**    **One year**    **First time**

**Have you applied for:**      **CDF Assistance**    **Yes**    **No**

**HELB loan**    **Yes**    **No**      **MoE bursary**    **Yes**    **No**    **Not eligible**

**HELB = Higher Education Loans Board, CDF = Constituency Development Fund,  
MoE = Ministry of Education**

**If yes, kindly attach a copy of the application form.**

***Part 3 – Extracurricular Activities***

**Membership in clubs & societies (state your role in each by entering an M for member or an E if you served on the executive committee)**

- |  |  |
|--|--|
| <input type="checkbox"/> Accounting Students Association | <input type="checkbox"/> French Club                           |
| <input type="checkbox"/> AIESEC                          | <input type="checkbox"/> Information Technology Club           |
| <input type="checkbox"/> Community Development Assoc.    | <input type="checkbox"/> Marketing Students Association        |
| <input type="checkbox"/> Daystar Christian Fellowship    | <input type="checkbox"/> Peer Counselors                       |
| <input type="checkbox"/> Debate Club                     | <input type="checkbox"/> SIFE                                  |
| <input type="checkbox"/> Doulos                          | <input type="checkbox"/> Wildlife Club                         |
| <input type="checkbox"/> Environmental Club              | <input type="checkbox"/> Other (specify): <input type="text"/> |

**Sports involvement**

- |                                      |  |
|--------------------------------------|--|
| <input type="checkbox"/> Badminton:  | <input type="checkbox"/> Football (Soccer):          |
| <input type="checkbox"/> Basketball: | <input type="checkbox"/> Tennis:                     |
| <input type="checkbox"/> Hockey:     | <input type="checkbox"/> Volleyball:                 |
| <input type="checkbox"/> Rugby:      | <input type="checkbox"/> Other: <input type="text"/> |

***Part 4 - Essay questions***

Please write a brief paragraph, single spaced, one or two sentences, on each of the first six items below. Write a personal testimony as described in item 7 below. This shall be approximately one page in the space provided.

1. Daystar students are expected to be servant-leaders while at the University and after graduation. What areas of service have you been engaged in over the past four years or how are you currently serving?

2. Describe why you want to study this particular course in a Christian institution and clearly state your philosophy about the career you are to pursue or are now pursuing.

3. Please describe and evaluate the Christian ministry in which you are involved currently.

4. Have you found yourself in a leadership role of any kind? Please describe and state your personal strengths and weaknesses in regards to this leadership role.

5. Why do we as Christians believe in Jesus Christ? Give sound biblical reasons for your faith.

6. Describe your understanding of “servant-leadership”.

7. Life Testimony: Write a statement of your testimony in the following block including these four elements: personal background, how you came to faith in Christ, why you chose Daystar University, and what your hopes for the future are upon graduation.



My Life Testimony:

A large, empty rectangular box with a thin black border, intended for the user to write their life testimony. The box occupies most of the page's vertical space below the title.

**Declarations:**

**Applicant's declaration:**

I confirm that all of the information aforementioned is true and correct. I claim and accept responsibility for any information found to be false.

Name \_\_\_\_\_ ID/Passport No. \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Parent/Guardian declaration:**

I confirm that all the information aforementioned is true and correct. I claim and accept responsibility for any information found to be false.

Name \_\_\_\_\_ ID No. \_\_\_\_\_

Relationship to applicant (father, mother, etc) \_\_\_\_\_

Address \_\_\_\_\_

Telephone: \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Church minister declaration:**

I have known the applicant as a member of the church for \_\_\_\_\_ years. I wish to confirm that to the best of my knowledge, information given in this application is correct and true.

Name \_\_\_\_\_ ID No. \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

Signature and Stamp \_\_\_\_\_