

Financial Aid Application - 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 the type of award.

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 16 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 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. **LATE** applications will not be considered. Financial Aid Office handles matters professionally therefore please use your daystar emails in any case of inquiry (eg. *Josephatwairimu111230@daystar.ac.ke*)

Download, Print, fill and submit to the Financial Aid office (Either Nairobi or Athi Campus), Enter in the required data, where information does not apply to you write N/A.



FINANCIAL AID APPLICATION

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

Admission No.

Postal Address

Phone E-mail

(Strictly Daystar Email)

Part 1- Personal Information

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

Nationality Home City

Campus Boarder Yes No

Program enrolled in:

<input type="checkbox"/> Diploma	Major	<input type="text"/>
<input type="checkbox"/> Undergraduate (day)	Concentration (if any)	<input type="text"/>
<input type="checkbox"/> Undergraduate (evening)	Minor (if any)	<input type="text"/>
<input type="checkbox"/> 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)
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

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:

<input type="checkbox"/> None	<input type="checkbox"/> Primary	<input type="checkbox"/> Diploma
<input type="checkbox"/> Bachelors	<input type="checkbox"/> High School	<input type="checkbox"/> Postgraduate

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

<input type="checkbox"/> Businessperson	<input type="checkbox"/> Retired	<input type="checkbox"/> Farmer	<input type="checkbox"/> Unskilled
<input type="checkbox"/> Professional	<input type="checkbox"/> Other, Specify	<input type="text"/>	

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

<input type="checkbox"/> None	<input type="checkbox"/> Primary	<input type="checkbox"/> Diploma
<input type="checkbox"/> Bachelors	<input type="checkbox"/> High School	<input type="checkbox"/> Postgraduate

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

<input type="checkbox"/> Businessperson	<input type="checkbox"/> Retired	<input type="checkbox"/> Farmer	<input type="checkbox"/> Unskilled
<input type="checkbox"/> Professional	<input type="checkbox"/> Other, Specify	<input type="text"/>	

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 spouse's monthly salary

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 SchoolName 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.

Item	Typical Amount for two terms	Your Cost for the year
Tuition fees (18 hrs)	193,716	
Room (Hostel)	32,104	
Board (Cafeteria)	58,000	
Medical	17,500	
Examination	2,500	
Student Activity	2,000	
Technology	6,000	
Library	4,000	
Printing	400	
TOTAL (A)	316,220	-

Current outstanding balance (if any):

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			
SUB-TOTALS	0		0
GRAND TOTAL RESOURCES (C)	0		

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

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

Wages or salaries Business

Farming

Total:

List your family's total obligations:

school fees for siblings rent (or mortgage)

utilities
transport
medical,

household expenses
including food.

Total:

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**

If applied, kindly attach a copy of the application form.

If NOT eligible, please give a valid reason

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

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 regard 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”.

My Life Testimony:

7. Write a statement of your testimony in the following block including these four elements: **a)** Personal background including family financial situation, **b)** How you came to faith in Christ, **c)** Why you chose Daystar University, **d)** and what your hopes for the future are upon graduation

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 _____