





## **Blooming Futures Foundation**

Student Vulnerability Assessment & Scholarship Application Form

Section 1: Personal Information			
Full Name:			
Date of Birth::			
Gender:			
Nationality:			
Home Address:			
Phone Number::			
Email Address:,.			
Parent/Guardian Name(s):			
Parent/Guardian Contact Number:			
Relationship to Applicant:			
Section 2: Educational Background			
Current School/Institution:,			
Current Grade/Class/Form/Level:			
Type of Institution:			
□ Primary			
□ High School			
□ College			
□ University			

Intended Course of Study (if appl	icable)
Academic Performance (attach la	atest report card or transcript):
0(10 F)	
Number of People in Household:	lly & Socio-Economic Background
Number of Siblings:	
Are any siblings currently in scho	ool?
□ Yes	
□ No	
Parent/Guardian Employment Sta	atus:
□ Employed	
□ Unemployed	
□ Self-Employed	
□ Retired	
□ Deceased	
Monthly Household Income (appr	roximate):
<ul><li>Below [Ksh] 1000</li></ul>	
■ [Ksh] 1000 – 5000	
<ul><li>Above [Ksh] 5000</li></ul>	
Does the family receive any gove	ernment or NGO assistance?
□ Yes (please specify):	
□ No	

□ Own	<del>e</del> u
□ Rent	ed
□ Temp	porary/Shelter
□ Othe	r (please specify):
Please	Section 4: Vulnerability Assessment indicate if any of the following apply to the applicant (tick all that apply):
□ Orph	aned (one or both parents deceased)
□ Livin	g with a disability
□ Chro	nic illness (self or immediate family)
□ Singl	le-parent household
□ Displ	laced/Refugee status □
Victim	of abuse or neglect
□ Othe	r (please specify):
Briefly	describe the challenges faced by the applicant and family:
_	additional pages if necessary)
(/ titaon	radditional pages if ricoessary)
Sec	ction 5: Scholarship Request
Type o	f Scholarship Requested:
□ High	School
□ Colle	ege
□ Unive	ersity
□ Basid	c Upkeep Necessities

Level of Assistance Needed:    Fully Funded     Partial (please specify percentage or amount):   List specific needs (tuition, books, uniforms, transport, meals, accommodation, etc.):   Section 6: Motivation Statement     In your own words, explain why you are applying for this scholarship and how it will impact your future:   (Minimum 150 words)     Section 7: Supporting Documents Checklist     Copy of birth certificate or national ID     Latest academic report or transcript     Proof of household income (pay slip, letter from employer, etc.)     Recommendation letter from school or community leader     Any relevant medical or legal documents     Any other supporting documents		
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- Any other supporting desuments	Copy of birth certificate or national ID  Latest academic report or transcript  Proof of household income (pay slip, letter from employer, etc.)	
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I hereby declare that the information provided in this application is true and complete to the best of my knowledge. I understand that any false information may result in disqualification from the scholarship program.

Applicant Signature:			
Date:			
Parent/Guardian Signature:			
Date:			
	For Official Use O	nly	
Date Received:	Official Stamp.	Sing	
Receiving Officer			
Application Number:			
Assessment Outcome:			
Scholarship Awarded:			
Comments:			
	application and all sup ooming Futures Found		

growthinspire572@gmail.com