



**UNIVERSITY OF EMBU**  
**OFFICE OF THE REGISTRAR**  
**(ACADEMICS, RESEARCH AND EXTENSION)**

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**SCHOLARSHIP APPLICATION FORM**

**A Important Information**

1. Fill parts B and C of the form only
2. Attach certified copies of transcripts/results slips, bachelor's degree certificates/letter of completion and Identity Card
3. Submit the application documents to the Registrar (Academics, Research and Extension)

**B Applicant's Details**

Applicant's Name:..... ID Number:.....

Bachelor's Degree and Class: .....

Master's degree to be pursued:.....

**C Referees**

*Provide two referees who can attest to your academic capability*

**First Referee**

Name: ..... Affiliation Institution:.....

Email address:..... Cell Number:.....

**Second Referee**

Name: ..... Affiliation Institution:.....

Email address:..... Cell Number:.....

Applicant's Signature:..... Date:.....

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**D Chairman of Department (For Official Use Only)**

Recommended  Not Recommended (Give Reason (s)):

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.....  
CoD's Name:..... Sign:..... Date:.....

**E Dean of School (For Official Use Only)**

Recommended  Not Recommended (Give Reason (s)):

.....  
.....  
Dean's Name:..... Sign:..... Date:.....

**G Chairman, Deans' Committee (For Official Use Only)**

Approved  Not approved

Sign:..... Date:.....

