

# GALANA ENERGIES FOUNDATION SCHOLARSHIP APPLICATION FORM

## INSTRUCTIONS/GUIDELINES

1. The information provided in this form is intended to assist the Galana Energies Foundation Scholarship Selection Board understand the applicant's academic and financial background for the purpose of assessment for the scholarship award.
2. This application form must be filled accurately and completely. Any incomplete or inaccurately filled forms render the applicant illegible for scholarship.
3. If called for the interview, the applicant must bring the following original documents together with this application form: -
  - a. An original and copy of the 2025 KJSEA Certificate or Result slip.
  - b. An original and copy of the Senior Secondary School admission letter.
  - c. A passport size photograph attached to this application form.
  - d. An original and copy of the birth certificate.

***Galana Energies Foundation will not retain any original documents.***

4. Copies of all documents required must be provided by the applicant. Any applications without the relevant documents will be rejected.
5. Canvassing will lead to automatic disqualification.
6. Any false statements, omissions or forged documents will lead to automatic disqualification.
7. Galana Energies Foundation reserves the right to make the final determination of scholarship beneficiaries. The completion and submission of this form is not a guarantee for sponsorship.

## ELIGIBILITY OF THE APPLICANT

1. Should have been admitted to a senior secondary school
2. Should be from a very needy home or family.
3. Should be willing to participate in an interview.
4. Should have sat for their KJSEA in 2025.
5. Should have attained Exceeding Expectations (Levels 7-8) in their 2025 KJSEA

## SUBMISSION

1. Email your completed form to: **info@galanafoundation.com** or
2. Submit it at any Galana Energies Service Station nationwide

**PART A:**

**ATTACH THE  
APPLICANT'S  
PHOTO HERE**

**PART B:****APPLICANT'S PERSONAL DETAILS****PERSONAL DATA**

Full name of applicant:

Gender:  Male  FemaleDate of birth:        

\*(Attach copy of birth certificate)

Mobile No.          Alternative Mobile          

Physical Address: County \_\_\_\_\_ Sub-County: \_\_\_\_\_

Ward: \_\_\_\_\_ Location: \_\_\_\_\_ Sub-Location: \_\_\_\_\_

Family status (Both parents/ Single parent/ Orphan): \_\_\_\_\_

**ACADEMIC INFORMATION**

Name of Junior School Attended \_\_\_\_\_

P.O. Box:        Town/City:        Postal Code:        Tel No.        Alternative Tel Number               

Physical Address: County \_\_\_\_\_ Sub-County: \_\_\_\_\_

Ward: \_\_\_\_\_ Location: \_\_\_\_\_ Sub-Location: \_\_\_\_\_

KJSEA Assessment No.

*'Attach a copy of the result slip and bring the original to the interview.'*

## KJSEA Achievement

Achievement Category	EE <sub>1</sub>	EE <sub>2</sub>	ME <sub>1</sub>	ME <sub>2</sub>	AE <sub>1</sub>	AE <sub>2</sub>	BE <sub>1</sub>	BE <sub>2</sub>
Achievement Level	8	7	6	5	4	3	2	1

*(Tick appropriate)*

**Pathway Selected:** STEM  Social Science  Arts & Sports

Senior Secondary school admitted to \_\_\_\_\_

## PART C:

## APPLICANT'S FAMILY INFORMATION

## PARENT'S INFORMATION

Father's Full Name:

ID No.         Living  Deceased \*If deceased, please attach copy of death/burial certificate

Physical Address: \_\_\_\_\_ County \_\_\_\_\_ Sub-County: \_\_\_\_\_

Ward: \_\_\_\_\_ Location: \_\_\_\_\_ Sub-Location: \_\_\_\_\_

Postal Address: P.O. Box:  Town/City:

Postal Code:  Telephone/Mobile No.

Mother's Full Name: \_\_\_\_\_

ID No.   Living  Deceased \*If deceased, please attach copy of death/burial certificate

Physical Address: \_\_\_\_\_ County \_\_\_\_\_ Sub-County: \_\_\_\_\_

Ward: \_\_\_\_\_ Location: \_\_\_\_\_ Sub-Location: \_\_\_\_\_

Postal Address: P.O. Box:  Town/City: Postal Code:  Telephone/Mobile No. 

Occupation: \_\_\_\_\_

**GUARDIAN INFORMATION (If not living with the parents)**ID No.  Relationship with the applicant \_\_\_\_\_

Physical Address: \_\_\_\_\_ County \_\_\_\_\_ Sub-County: \_\_\_\_\_

Ward: \_\_\_\_\_ Location: \_\_\_\_\_ Sub-Location: \_\_\_\_\_

Postal Address: P.O. Box:  Town/City: Postal Code:  Telephone/Mobile No. 

Occupation: \_\_\_\_\_

**DETAILS OF FAMILY CIRCUMSTANCES**

	Father	Mother	Guardian			
Name						
Age						
	Yes (tick)	No (tick)	Yes (tick)	No (tick)	Yes (tick)	No (tick)
Do any of your parents have any form of disability?						
Are you living with both parents?						
Do your parents or guardians own land/plot?						
Do your parents/guardians have any other assets or sources of income including casual labor?						

**SIBLING INFORMATION**

List all your brothers and sisters starting with the oldest and state what each is doing: -

	Name	Age	High School Attended	Occupation
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

**SKETCH A DIRECTIONAL MAP TO THE HOME FROM THE NEAREST LANDMARK**

**PART D:****APPLICANT'S EVIDENCE OF NEED****Section 1**

Who do you live with?  Parent  Guardian  Other(Specify) \_\_\_\_\_

Indicator	Description
Why are you applying for a scholarship	
Have you received any financial support or bursaries in the past? Please provide details.	

**To be completed by parent or guardian:**

Briefly explain below why the family cannot afford to pay the applicant's school fees: -

Name \_\_\_\_\_

Relation to the applicant: \_\_\_\_\_

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

ID No. \_\_\_\_\_ Mobile No. \_\_\_\_\_

**Section 2**  
**Recommendations.****Confirmation and recommendation by Junior School Principal**

I confirm that \_\_\_\_\_ (Name of pupil) was a pupil in my school. I also confirm that he/ she has now been admitted into senior secondary school and obtained the marks as indicated on this form.

I recommend that this pupil be supported by Galana Energies Foundation on the following grounds:

Family Circumstances\_\_\_\_\_

Leadership potential\_\_\_\_\_

Character/ Conduct\_\_\_\_\_

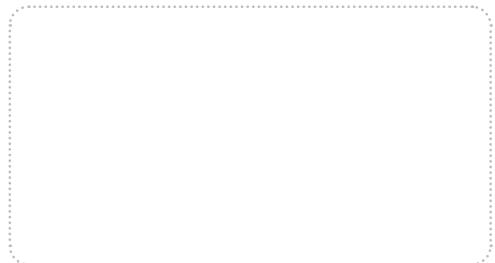
Principal's Signature \_\_\_\_\_ School Stamp

Principal's Name\_\_\_\_\_

Date \_\_\_\_\_

ID No \_\_\_\_\_ Mobile No: \_\_\_\_\_

TSC No \_\_\_\_\_

**Recommendation by a Spiritual Leader (Priest, Pastor, Imam etc.)**

I have read the information provided in this form and believe it to be truthful. Based on my knowledge of the family and/or inquiries I have made, I make the following recommendation regarding the needy circumstances and conduct of this applicant.

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Signature \_\_\_\_\_ Position \_\_\_\_\_



Name \_\_\_\_\_ Date \_\_\_\_\_

ID No \_\_\_\_\_

Mobile No: \_\_\_\_\_

Organization \_\_\_\_\_

Stamp:

**Recommendation by a local leader (Chief or Sub-Chief)**

I have read the information provided in this form and believe it to be truthful. Based on my knowledge of the family and/or inquiries I have made I make the following recommendation regarding the needy circumstances and conduct of the applicant:..

Please include a brief summary of your recommendation.



Signature \_\_\_\_\_ Position \_\_\_\_\_

Name \_\_\_\_\_ Date \_\_\_\_\_

ID No \_\_\_\_\_

Mobile No: \_\_\_\_\_



Stamp:

**Part E:****How did you first learn about the scholarship program**

- A Galana Energies Service Station
- School-Teacher, Principal, Counselor
- Religious institutions; Church, Mosque, Synagogue
- Parents, Guardians or Relatives
- Website
- Others (Specify) \_\_\_\_\_

**PART F:****APPLICANT'S DECLARATIONS**

I, \_\_\_\_\_ declare that the information given above is true to the best of my knowledge and I am aware that giving false representation will mean that my application will not be considered and will lead to automatic disqualification. I authorize Galana Energies Foundation or its Representatives to obtain such additional information concerning my educational program and financial records as needed to complete this scholarship application. I also authorize Galana Energies Foundation and its representatives to communicate and release information to others who are involved in making decisions relating to my educational plans including and not limited to my previous and future schools, referees named in this form and the Ministry of Education. In the event I win the Scholarship, I commit myself to perform at my optimal best through my secondary school course.

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

**PARENT'S/GUARDIAN'S DECLARATION**

I, \_\_\_\_\_ confirm that the information provided is true to the best of my knowledge and I am aware that giving false representation will mean that my application will not be considered and will lead to automatic disqualification. On behalf of my child, I authorize Galana Energies Foundation or its Representatives to obtain such additional information concerning this applicant's education and financial records as needed to complete this scholarship application. I also authorize Galana Energies Foundation and its representatives to communicate and release information to others who are involved in making decisions relating to the applicant's educational plans including and not limited to their previous and future schools, referees named in this form and the Ministry of Education.

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

*\*If you wish to provide additional information, please attach a separate piece of paper*

**CONTACTS**

For any questions or grievances regarding the application process of the Galana Energies Foundation scholarship 2026, please contact;

**Tel: +254-20-4934000 / 0709497000**  
**Email: info@galanafoundation.com**

**APPROVAL NOTES (For official use by Galana Energies Foundation only)**