

	TECHNICAL UNIVERSITY OF MOMBASA	
	Document: Form	Ref No.: TUM/Form/HRM/008
	Title: BURSARY REQUEST	
	Department: HUMAN RESOURCE MANAGEMENT	
	Issue No. 2	Revision No. 0

(To Be Filled In Quadruplicate)

PART A: STAFF DETAILS

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Last Name First Name Middle Name

ID/No..... Staff No..... PIN.....

Date of first Appointment Designation.....

Current Grade..... Current Department.....

Employment Term:

Permanent & Pensionable Contract Temporary Casual

Staff Member:
Signature Date

PART B: STUDENT'S DETAILS

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Last Name First Name Middle Name

Date of Birth: ID/No..... Student No.....

Department:

Course Title:

Duration..... Semester: Current Semester Fee: KShs

Staff Member:
Signature Date

PART C: CONFIRMATION OF BURSARY DETAILS

Confirmed the student's record in Part B above is true and correct.
Other comments (*If any*):

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Chairperson - Training Department:
Signature Date & Stamp



PART D: VERIFICATION OF BURSARY REQUEST

1. Verified that the student **is/is not** a child of the member of staff applying for the bursary.
2. The age of the child is **within/beyond*** the **age limit** for bursary consideration.
3. Attached Copies: (a) Certificate of Birth **Attached/Not Attached***
(b) Student Fee Statement **Attached/Not Attached***

Overall Comment: The applicant **is/is not*** eligible for the bursary as per the Terms of Service.

Human Resource Manager

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Signature Date & Stamp

PART E: APPROVAL

Bursary **Approved/Not Approved***

Vice Chancellor

Signature Date & Stamp

PART F: ACTION

Bursary of KShs. **Granted/Not Granted***

Finance Officer

Signature Date & Stamp

NB:

1. * Delete Whichever Not Applicable.
 2. Single Copies Of Certificate Of Birth And Student Fee Statement Should Be Attached.
 3. Distribution of Copies: Original – Finance Officer, Duplicate – Staff File, Triplicate –Training Department, Quadruplicate - Staff Member
 4. Age Limit Is Twenty Four (24) Years On First Admission.
- Our Vision : A University of global excellence in advancing knowledge, Science *and Technology*

