



**DEDAN KIMATHI UNIVERSITY OF TECHNOLOGY  
DIRECTORATE OF STUDENTS' WELFARE**

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**WORK-STUDY APPLICATION FORM**

Name: .....  
Surname Other names

Reg. No. .... Year of study: ..... Contact:.....

Program of Study:.....

**1. STUDENT'S STATUS**

- i. Mother's name: ..... Contact: .....
- ii. Father's name: ..... Contact: .....
- iii. Guardians' name: ..... Contact: .....

**2. FAMILY BACK GROUND**

- i. Family residential area: .....
- ii. Occupation of parents/guardians: .....
- iii. Medical condition of parents/chronic illness: .....
- iv. No. of children in family: .....
- v. Siblings in School:.....

**3. SOURCES OF INCOME**

- i. Support from parents: .....
- ii. HELB allocation per year: .....
- iii. Have you ever benefited from DeKUT bursary before? Amount:.....  
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- iv. Have you ever benefited from Work-study before?.....Indicate amount earned.....  
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