



MASENO UNIVERSITY
DIRECTORATE OF STUDENT AFFAIRS
Internal Memo

From: Director Student Affairs

Date: 27th January, 2026

To: ALL STUDENTS

Ref: MSU/DSA/RAT/16

RE: APPLICATION FOR RATTANSI BURSARY FOR 2025/2026 ACADEMIC YEAR

Applications for Rattansi Bursary are invited from **deserving needy students** of this University. The students should be currently in session.

Applicants **MUST** meet the following criteria: -

- Be a registered student of Maseno University.
- Be of good conduct and character.
- Be of good academic record.
- Must not be on any Scholarship.

Applicants are advised to indicate their County of origin and any other assistance/support they are currently receiving from other organizations e.g. Ministry, HELB, CDF etc.


Note: *Providing false information and forgery will lead to automatic disqualification and disciplinary action by the University.*

Needy students, orphans and students living with disabilities are encouraged to apply.

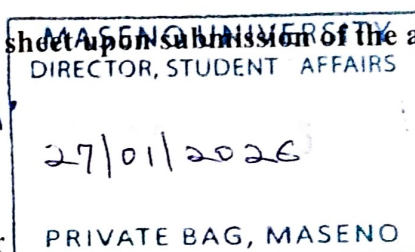
Attach relevant supporting documents.

Application forms are available online on the University Website. Duly filled forms should be submitted at the Directorate of Student Affairs not later than **Friday 30th January, 2026, at 4:00pm**. Applicants in Kisumu and Odera Akang'o Campuses are **advised to deliver their forms at the offices of their respective Directors by the said date and time.**

NB: Ensure to sign the control sheet upon submission of the application form.


Prof. Peter Oracha
for: Director, SA

Copies to: Vice - Chancellor
Deputy Vice Chancellor, ASA
Deputy Vice Chancellor, AF&D
Finance Officer
Deputy Director Students Affairs



Registrar, ASA
NOTICE BOARDS
Deans of Schools





MASENO UNIVERSITY
DIRECTORATE OF STUDENT AFFAIRS

RATTANSI BURSARY APPLICATION FORM

PERSONAL INFORMATION:

NAME: _____
DEGREE PROGRAMME: _____
CELL PHONE NO: _____
EMAIL ADDRESS: _____
DEPT. _____

REG. NO. _____
YEAR OF STUDY: _____
COUNTY: _____
CONSTITUENCY: _____

ORPHAN: (Attach proof): _____

LIVING WITH DISABILITY: _____

NATURE OF DISABILITY (Attach proof): _____

FAMILY STATUS: (tick where applicable and attach relevant documents)

- 1: SINGLE PARENT: _____
2: UNEMPLOYED PARENTS: _____
3: OTHERS (Specify and provide/attach proof): _____

DETAILS OF LOANS AND BURSARIES: (indicate clearly, type and amount)

- 1: LOAN _____ AWARDING ORGANISATION. _____ AMOUNT (KSHS) _____
2: BURSARIES _____ AWARDING ORGANISATION. _____ AMOUNT (KSHS) _____
3: OTHERS (Specify) _____

ACADEMIC PROGRESS

Previous academic year average grade _____
(Attach certified result slip by Dean of school)

FOR OFFICIAL USE ONLY

FINANCE DEPARTMENT

Fees balance _____

Does the applicant benefit from any sponsorship? (tick appropriately) Yes _____ No _____

Name of officer _____

Signature and Stamp _____

Date _____

NOTE: - Incomplete forms will not be processed
- False information will lead to disqualification and a disciplinary action

