



## HIGHER EDUCATION LOANS BOARD CORRECTION OF PARENTS DETAILS AND FAMILY INCOME-TVET LAF

*Any person who when filling a loan application form, knowingly makes a false statement relating to any matter affecting the request for loan shall be guilty of an offense and is liable to a fine not less than Kenya Shillings Thirty Thousand, Ksh.30000 or to imprisonment of not less than three years (Section 13(3) of the HELB ACT (CAP 213A))*

### A. PERSONAL DETAILS OF THE APPLICANT

NAME	FIRST NAME	MIDDLE NAME	OTHER NAME
NATIONAL ID NUMBER			
INSTITUTION			
INSTITUTION REGISTRATION NO.			
E-MAIL ADDRESS			
TELEPHONE NUMBER			
LOAN SERIAL NUMBER			

### B. FAMILY BACKGROUND

*Tick appropriately (Provide copy of death Certificate or burial permit for deceased parents)*

Both parents Alive	One parent deceased	Both parents deceased
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**If both parents alive,**

Married	Divorced	Single parent	Separated	Unmarried	Abandoned
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### DETAILS OF ALIVE PARENTS (Provide copies of latest pay slip for working parents)

#### Father

#### Father's income

FIRST NAME	MIDDLE NAME	OTHER NAME	Gross monthly income	
			Business (Annual)	
NATIONAL ID NUMBER	DATE OF BIRTH	KRA PIN	Farming (Annual)	
			Pension (Monthly)	
OCCUPATION/PROFESSION	EMPLOYED YES <input type="checkbox"/> NO <input type="checkbox"/>		Support form GOK relief service	
			Other (Specify)	

#### Mother

#### Mother's Income

FIRST NAME	MIDDLE NAME	OTHER NAME	Gross monthly income	
			Business (Annual)	
NATIONAL ID NUMBER	DATE OF BIRTH	KRA PIN	Farming (Annual)	
			Pension (Monthly)	
OCCUPATION/PROFESSION	EMPLOYED YES <input type="checkbox"/> NO <input type="checkbox"/>		Support form GOK relief service	
			Other (Specify)	

### C. LOAN APPLICANT'S DECLARATION

I declare that the information given here in is true to the best of my knowledge. I also understand that this information will be used to appraise my loan application, which MUST be repaid if successful.

NAME.....SIGNATURE.....DATE.....

### D. DEAN OF STUDENTS CERTIFICATION

I certify that this is a Bonafede student of this institution pursuing a course at the following level; Diploma  Certificate

NAME.....SIGNATURE.....DATE.....

**Official Institution Stamp**