



## KENYA SCHOOL OF MONETARY STUDIES

### REGIONAL CERTIFICATE IN AGRICULTURAL FINANCE (CAF)

# SCHOLARSHIP NOMINATION FORM

#### **Part I: Preamble**

Kenya School of Monetary Studies with support from USAID is offering a regional, Certificate in Agricultural Finance (CAF) targeting practitioners the Agricultural Financing subsector in Kenya and the wider Eastern African region. CAF is a practice oriented program intended to equip participants with knowledge, skills and attitudes required to improve on agricultural lending in the target region. Specifically, participants will be drawn from diverse stakeholder bodies, such as, commercial banks, microfinance institutions, Savings and Credit Organizations, Institutions that deal with agricultural finance e.g. Agricultural Finance Corporations, Ministry of Trade, Agriculture and Livestock.

USAID and KSMS will award one Scholarship to a nominated participant by the target organization on condition that the institution pledges to sponsor one participant. We request that while making your nomination, you need to ensure that one of candidates is a woman.

To qualify for admission into the programme and consideration for Scholarship the candidate must:

1. Meet the minimum requirement stipulated in the CAF prospectus
2. Be drawn from the Lending arm of your organization;
3. Be working as at least middle management level

This form must be completed and signed by the CEO of the organization or his/her nominee preferably the Human Resource Manager and sent together with the duly filled applications for admissions form.

#### **Part II: Details of Scholarship Nominee**

Name: \_\_\_\_\_

Gender \_\_\_\_\_

Present Mailing Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Contact Details: Telephone: Landline \_\_\_\_\_ Mobile \_\_\_\_\_

Email \_\_\_\_\_

Employer's Detail \_\_\_\_\_

Position in employment \_\_\_\_\_

**Part III: Details of Nominee to be Supported by the Employer**

Name: \_\_\_\_\_

Gender \_\_\_\_\_

Present Mailing Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Contact Details: Telephone: Landline \_\_\_\_\_ Mobile \_\_\_\_\_

Email \_\_\_\_\_

Employer's Detail \_\_\_\_\_

Position in employment \_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_

Designation \_\_\_\_\_