



COUNTY GOVERNMENT OF MERU
MERU YOUTH SERVICE BOARD



Email: ceomys@meru.go.ke
Headquarters

Meru County

When replying please quote

P.O Box 120-60200

Kindly attach the following:

Copy of ID

Academic certificates

Medical report (Level 4 hospital)

Passport

MERU YOUTH SERVICE APPLICATION FORM 2023

INTAKE

SECTION 1: BASIC DETAILS

Surname		Middle name	
First name		Date of birth	
Gender		Age	
Marital Status		Id Number	
Phone Number		Physical Address	

Disability status: YES ☐ NO ☐

If yes, please specify the nature of Disability.....

SECTION 2: ADDRESS AND EMERGENCY CONTACT

Sub-county		Ward	
Emergency contact 1		Relationship	
Emergency contact 2		Relationship	

SECTION 3: FAMILY BACKGROUND

Kindly indicate your family status (*tick where applicable*)

Both parent alive	
One parent alive	

Orphan	
Single parent	
Number of siblings	

SECTION 4: LEVEL OF EDUCATION

(Answer yes or no where applicable)

Completed primary school (Yes)/ (No)

Name of primary school.....

Year of completion

Completed secondary school (Yes)/ (No)

Name of secondary school.....

Year of completion

(Attach copies of relevant academic certificates)

SECTION 5: COURSE OF INTEREST

(Kindly tick on the course of your choice)

☐ Dairy Farm Management Course

☐ Professional Security Guard Course

☐ House Management Course

CLERGY

Signature

CHIEF

Signature

Stamp

Stamp

NB;

The duly filled application form should be hand delivered to the respective Ward

Administrator's Office on or before 31st March 2023

The application form can be found at the Meru County Government website

(www.meru.go.ke)