



KENIA UNIVERSITY COLLEGE

P.O.BOX 1222,10300
 Tel : 0708 771219
 Email : info@kuc.co.ke
 Web : www.kuc.co.ke

ADMISSION FORM

READ THE INSTRUCTIONS BEFORE COMPLETING THIS FORM. COMPLETE ALL APPROPRIATE SECTIONS IN CAPITAL/BLOCK LETTERS AND RETURN WITH YOUR NON-REFUNDABLE APPLICATION FEE AND OTHER SUPPORTING DOCUMENTS TO: Kenia University College,

Registrar Academic Administration Office

P.O. Box 1222-10300 KIRINYAGA, KENYA

Mobile Phone: +254 708771219;

Email: apply@kuc.ac.ke

PLEASE WRITE IN CAPITAL LETTERS.

1. APPLICANT'S DETAILS

FULL NAMES (as per secondary school certificates or its equivalent)				
TITLE	MR[]	MRS[]	MS[]	GENDER Male [] Female []

2. PERMANENT ADDRESS

DATE OF BIRTH		NATIONALITY.		NATIONAL ID/PASSPORT NO.	
COUNTY		SUB- COUNTY		LOCATION	
*COUNTRY OF RESIDENCE					
P.O.BOX		EMAIL			
MOBILE PHONE		*CITY/TOWN			

3. PARENT/GUARDIAN INFORMATION

NAME OF THE FATHER:	PHONE NUMBER:	OCCUPATION:	DECEASED/ALIVE
NAME OF THE MOTHER:	PHONE NUMBER:	OCCUPATION:	DECEASED/ALIVE
NAME OF THE GUARDIAN:	PHONE NUMBER:	OCCUPATION:	

4. EMERGENCY CONTACTS

NAME:	PHONE NUMBER:	OCCUPATION:	RELATIONSHIP
NAME:	PHONE NUMBER:	OCCUPATION:	RELATIONSHIP

5. EDUCATIONAL BACKGROUND:

a. Secondary Education

INSTITUTIONS ATTENDED	FROM (YEAR)	TO (YEAR)	CERTIFICATE AWARDED	MEAN GRADE

b. Post-Secondary Education

INSTITUTIONS ATTENDED	FROM (YEAR)	TO (YEAR)	CERTIFICATE/DEGREE AWARDED	CLASSIFICATION

6. EDUCATIONAL PLANS (tick as appropriate)

i.	PROGRAMME LEVEL	CPA <input type="checkbox"/> Diploma <input type="checkbox"/> Certificate <input type="checkbox"/>
ii.	PROGRAMME NAME	Teaching Subjects / Specialization <i>(Where Applicable)</i>
iii.	MODE OF STUDY	Regular <input type="checkbox"/> Evening <input type="checkbox"/> Distance Learning <input type="checkbox"/>
iv.	PREFERRED INTAKE	January <input type="checkbox"/> April <input type="checkbox"/> May <input type="checkbox"/> August <input type="checkbox"/> September <input type="checkbox"/> December <input type="checkbox"/>

7. FINANCING OF STUDIES.

Please Tick SELF <input type="checkbox"/> PARENTS/GUARDIAN <input type="checkbox"/> GOVERNMENT/HELB <input type="checkbox"/> OTHER SPONSORSHIP <input type="checkbox"/>

8. HOBBY

PREFERRED SPORT	
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9. a) DO YOU HAVE ANY FORM OF DISABILITY? Tick Appropriately

Physical disability Visual impairment Hearing Impairment Mental health conditions (e.g. Bipolar)

Autism Spectrum Disorder Dwarfism Other Specify

b) IS THERE ANY OTHER CONDITION YOU NEED TO BRING TO THE ATTENTION OF THE UNIVERSITY THAT MAY REQUIRE SPECIAL ATTENTION?

Please Provide Details;

10. INDICATE HOW YOU LEARNT ABOUT KENIA UNIVERSITY COLLEGE

Radio [] Television [] Newspapers [] Friends/referral [] Exhibitions [] Teachers [] Prospectus [] University Website [] Social media []
Career days []

11. DECLARATION

I consent that information on my conduct, fees status and academic progress may be made available to my parent/guardian/sponsor as appropriate.

12. ATTESTATION.

I hereby certify that the information given in this form is correct and complete to the best of my knowledge, and hereby give my permission to the admissions office to obtain any verification deemed necessary to process my application.

I will include with this application my application fee receipt and other documents as required in the application instructions.

Signature: Date:

Sign your form before returning it to Kenia University College.

14. FEE PAYMENT

MPESA:

1. Go to m-pesa
2. Lipa na m-pesa
3. Paybill number: 522522
4. A/C: 5831276
5. Enter Amount
6. Enter pin
7. Confirm details and press ok

BANK

- ACCOUNT NAME: **KENIA UNIVERSITY COLLEGE**
- ACCOUNT NUMBER: **1296864421**

ADMISSION CHECKLIST

1. Non-refundable application fee (Kshs. 1,000)
2. Duly filled and signed admission form
3. Copies of all academic certificates including secondary school certificates, bachelors, and transcripts certificates for accounting students. 4. Two (2) recent passport-size photographs (write your name on the reverse side)
5. Copy of national I.D/Passport.
6. An official translation of academic records (where language of study is not English)
7. A current financial guarantee letter.

REGISTRATION: Students should be registered for classes prior to the beginning of any semester to avoid failure to attain 2/3 class attendance. As a new student, you will be guided to complete the registration procedures during the registration/orientation period.

ONLY DULY FILLED APPLICATION FORMS WILL BE PROCESSED.

FOR OFFICIAL USE ONLY

ADMISSION NO: APPLICATION FEES RECEIPT NO. / CHEQUE NO..... DATE:
..... NAME: SIGNATURE

Kenia University College RESERVES THE RIGHT OF ADMISSION. More information may be obtained from the Office of the Registrar, Academic Administration.

Web : www.kuc.co.ke