

Affix one of your current passport size photographs

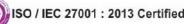
APPLICATION FORM FOR ADMISSION TO PROFESSIONAL PROGRAMMES

NOTE:

- 1. The form should be typed or completed and copies returned to the Deputy Vice-Chancellor (Academics, Research and Extension), P.O. Box 6 60100 Embu.
- 2. The following should be attached to the application form; (a) original copy of the fee deposit slip or MPESA payment transaction code for the payment of a non-refundable application fee KSh.500 for East Africans and USD 15 for Non-East Africans (b) copy of KCSE Result Slip/ or Certificate; (c) copy of National Identity Card/ Birth Certificate, and (d) two good quality passport size photographs.

SECTION A – Course Application Details

 Programme currently enrolled for at the University of Embu (UoEm) a) UoEm Programme of Study 		
	b) Admission Number	
2.	Name of professional course applied for	
3.	Registration Number (Where applicable e.g. KASNEB Reg. No.)	
4.	Date of commencement	
5.	Department School of	
Ful	Mode of study (Tick) time Evening Weekend Open learning Institutional Based TION B – Applicant's Personal Details	
	ames <i>(in full)</i> (Surname) (First Name) (Others)	
Pos	al AddressPostal Code Town/City	
Co	stituencyCountyCountry	
Tel	phoneE-Mail	
Dat	of BirthGender:	
Ma	tal StatusNationalityReligion	



Knowledge Transforms



National Identity Card No		Passport No	
2. Name of Next of Kin		Relationship	
Address	Postal Code	Town/City	Country
Telephone	E-Mail		
3. Emergency Contact (Name, if different from the above)			
Address	Postal Code	Town/City	Country
Telephone		E-Mail	
4. Do you have any form of disability? YES/NO			
If yes, indicate the nature of disability			

SECTION C – Institutions Attended by the Applicant and the Qualifications Obtained

List all institutions attended and the qualification obtained starting with the latest:

Institutions Attended	From: (Month and Year)	To: (Month and Year)	Qualification Obtained
i) Academic			
ii) Professional			

Please attach copies of certificates and academic transcripts

SECTION D – Applicant's Practical/Work Experience (Where applicable)

List your work experience

From	То	Employer	Designation	Nature of Assignment

<u>SECTION E – Applicant's Declaration</u>

I declare that the information given herein is true and accurate to the best of my knowledge and fully understand that any information found to be false would lead to automatic disqualification.

Applicant's Full Names	ID/Passport No
Date	Applicant's Signature



ISO / IEC 27001 : 2013 Certified

Knowledge Transforms

