



Affix a Recent
Passport Here

**JOMO KENYATTA UNIVERSITY OF AGRICULTURE AND TECHNOLOGY
SCHOOL OF OPEN, DISTANCE AND eLEARNING**

(STUDENT APPLICATION/REGISTRATION FORM (DEGREE COURSES))

(To be filled in duplicate)

Surname: Gender: (M/F)

Other names:

Company:

Address:

Telephone: Fax:

E-Mail:

Date of birth:..... Nationality: ID/Passport No:

Indicate the course applied for:

- Bachelor of Science in Information Technology (Year I and year II)
- Bachelor of Commerce (Year I and year II)
- Bachelor of Commerce and Business Administration (BCOMBA)
- Bachelor of Business and Office Management (BBOM)
- Bachelor of Co-operative Business (BCOB)
- Bachelor of Business Information Technology (BBIT)
- Bachelor of Mass Communication (BMASS)
- Bachelor of Purchasing and Supplies Management (BPSM)
- Bachelor of Development Studies

Intake Date:

Centre of Study:

EDUCATION

SCHOOLS ATTEND	DATE From (Year) To (Year)	QUALIFICATION

NB. (Attach certified copies of the relevant certificates and two passport sized photographs)



Sponsorship

Self:

Others (parent, Organization): _____ Address: _____

Telephone: _____ Contact Person: _____

Name and address of nearest relative, person or agency to be contacted in case of emergency;

Name: _____ Relationship: _____

Address: _____

Telephone: _____

TERM AND CONDITIONS

1. Courses fees must be paid in advance at the time of booking, unless prior credit arrangements are made and approved by an authorized officer of the Company.
2. Where credit is granted, the account must be settled within the agreed period otherwise a monthly penalty charge of 3% will be levied on a cumulative basis.
3. A 20% fee will be charged on any bookings cancelled before commencement of classes.
4. There will be no refund of any bookings cancelled or abandonment of classes once they have commenced.
5. A Kshs. 1,500 service fee will be charged on all returned cheques.
6. The center accepts no liability whatsoever for any injuries inflicted during the course of training.
7. The center accepts no liability for loss or damage to any property brought or left on the premises by students.
8. Students will be charged for any damages caused to equipment by their negligence.
9. Certificates will only be awarded after the fulfillment of all the particular course's requirements.

DECLARATION

I certify that the information/statements made by me on this form are correct and complete. I further certify that I have read, understood and agreed to comply with terms stipulated herein.

Signature: _____ Date: _____

Date: _____

All correspondence should be addressed to:-

The head of the Institution where the Application forms are obtained.

FOR OFFICIAL USE ONLY

Serial No.	Receipt No.	Sponsor	Date Received	Selected	Not Selected

Sign: _____ Date: _____

Director, SODEL

