

Serial No



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JOMO KENYATTA UNIVERSITY OF AGRICULTURE AND TECHNOLOGY
SCHOOL OF ARCHITECTURE AND BUILDING SCIENCES (SABS)
 P.O. Box 62000, Nairobi, 00200, Kenya Telephone 020 8008486/87/88 Fax 52164 THIKA

STUDENT APPLICATION FORM

BACHELOR OF ARCHITECTURAL STUDIES/BACHELOR OF ARCHITECTURE ()
BACHELOR OF LANDSCAPE ARCHITECTURE ()
BACHELOR OF CONSTRUCTION MANAGEMENT ()
BACHELOR OF QUANTITY SURVEYING ()
BACHELOR OF REAL ESTATE ()

(Please rank your preference of the programmes 1, 2, 3, 4, 5 and see footnote overleaf)

Surname: _____ Gender (M/F) _____

Other names: _____

Address: _____

Telephone: _____ Fax: _____

E-mail: _____

Date of Birth: _____ Nationality: _____

ID/Passport No: _____

Intake Date: _____

EDUCATION

SCHOOLS ATTENDED	DATES From (Year) To (Year)	QUALIFICATION

NB: (Attach certified copies of the relevant post Primary School certificates and one passport sized photograph)

Sponsorship

Self:

Others (Parent, Organization): _____ Address: _____

Telephone: _____ Contact Person: _____

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

Name: _____ Relationship: _____

Address: _____

Telephone: _____

TERMS AND CONDITIONS

1. Fees must be paid in advance at the time of registration, unless prior credit arrangements are made and approved by an authorized Officer of the sponsor.
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 canceled before commencement of classes.
4. There will be no refund of any bookings canceled or abandonment of classes once
5. they have commenced.
6. A Ksh.1,000 service will be charged on all returned cheques.
7. JKUAT does not accept any liability for loss or damage to any property brought or left on the premises by students.
8. Students will be charged for any damages to equipment by their negligence.
9. The degree 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 the terms stipulated herein.

Signature: _____ Date: _____

SPONSOR'S UNDERTAKING

I/WE, the undersigned, hereby confirm that the applicant will be sponsored by myself/ourselves for the listed course.

Please bill us. Payment will be made within _____ days.

Name of Sponsor: _____ Authorized Signature: _____

Date: _____

All correspondence should be addressed to: -
The Dean, School of Architecture and Building Sciences.

FOR OFFICIAL USE ONLY

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

Sign: _____ Date: _____
Dean, SABS

Note: If you missed your first choice programme would you accept the second/third/fourth/fifth programme in your ranking?

Yes

No