

**APPLICATION FORM FOR DIPLOMA AND UNDERGRADUATE STUDENT
ADMISSION**

This form should be completed by all prospective students willing to join the University of Eldoret under the Privately Sponsored Students Programme (PSSP). Fill the form in block letters and return to:-

**Registrar - Academic, University of Eldoret,
P. O. Box 1125 -30100, ELDORET, KENYA**

SECTION A

Applicant's Personal Information

Please fill in your official name and details

NAME: _____
(Surname) (Other names)

ID / PP. No.: _____ GENDER: Male Female
(National ID / Passport No./ Birth Certificate No) (Tick (√) as appropriate)

DATE OF BIRTH: _____ HOME COUNTY: _____

ETHNICITY: _____ NATIONALITY: _____

EMAIL: _____ PHONE: _____ POSTAL ADDRESS: _____

NATURE OF DISABILITY (if any): _____

SECTION B

Proposed Course Details

Please provide details of course and tick (√) boxes as appropriate.

Programme Applied for:-

Degree Diploma Certificate Enhancement

Programme: _____
(e.g. Mathematics/ Sustainable Development/ Business Management)

School _____
(e.g. Agriculture & Biotechnology)

Proposed Academic Year of Study _____
(e.g. 2020/2021)

Preferred Campus and Intake:

Town Campus January Intake Town Campus May Intake Town Campus August Intake

Main Campus August Intake

Mode of Study

Full-time Part-time

SECTION C

Finances

Indicate how you intend to finance your studies: Scholarship Personal funding Others

Give details of financing above _____

SECTION D

Academic, Professional & Employment History

Please attach *Certified* copies of ID, Birth Certificate, KCSE Result Slip or Certificate, other Certificates, Testimonials and Banking Slip

| S/No | Academic Institution <i>(e.g. Secondary School, College, University attended)</i> | Years <i>(e.g. 2017-2020)</i> | Academic Qualification <i>(e.g. KCSE, Diploma, HND)</i> |
|------|--|----------------------------------|--|
| | | | |
| | | | |

| S/No | Professional Examining Body <i>(e.g. KASNEB/ KNEC/University)</i> | Years <i>(e.g. 2017-2020)</i> | Professional Qualification <i>(e.g. CPA (K))</i> |
|------|--|----------------------------------|---|
| | | | |
| | | | |

| S/No | Employment History <i>(e.g. TSC, Ministry of Lands)</i> | Years <i>(e.g. 2017-2020)</i> | Position Held <i>(e.g. Clerk, Teacher, Researcher)</i> |
|------|--|----------------------------------|---|
| | | | |
| | | | |

SECTION E

Applicant's Declaration

I hereby declare that the information I have given in this form is correct

Signature: _____ Date: _____
(Applicant)

SECTION F

Official Use Only

To be filled by officer of University of Eldoret.

(A) Recommendation by Head of Department:

Candidates Application Accepted Candidates Application Rejected

Comments: (Head of Department):

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Signature: _____ Date: _____
(HoD)



(B) Recommendation by Dean of School:

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Signature: _____ Date: _____
(Dean of School)

(C) Recommendation by Registrar - Academic:

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Signature: _____ Date: _____
(Registrar - Academic)

