

SHORT-COURSES

APPLICATION FORM

Send to: The Principal,

Att: Head of Admissions & Industrial

Training

P. O. Box 31591-00600

NAIROBI

Tel:8563540/6, 8561985/8

Fax: 8562813

Email: admissions@utalii.co.ke

Web: www.utalii.co.ke

Note:

- This form should be completed in **BLOCK LETTERS**.
- The names given on this form will be names to be used on all official records in the College.
- Attach Application Fee of **Kshs. 1,000** in form of a banking slip payable to Kenya Utalii College, Co-operative Bank of Kenya, Stima Plaza Branch, A/C No. **01129070937100**.

Please affix your recent passport size photograph in this space

COURSE A	PPLIED FOR:					
PL	EASE PRINT YOUR	NAME THE WAY YO	U WANT	IT TO APPEAR	IN YOUR	CERTIFICATE
DATE OF BIRTH		DISTRICT OF BIRTH			NATIONAL ID/PASSPORT NO.	
MALE	FEMALE	SINGL	E	MARRIE	ED	NATIONALITY
Permanent Residential Address		Contact Address	Contact Address		Particulars of next of Kin Name:	
Tel No:		Tel No:			Tel No: Email:	
Email:		Fax:			Fax:	
OO YOU HA	VE ANY PHYSICAL D	DISABILITY? (Specify)				
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Mathematics				Art and Design				
History and Government				Agriculture				
Geography				Biological Science				
Economics				Physical Sciences				
Commerce				Christian Religiou	s Education			
Accounts					Social Education and Ethics			
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