



KERIO VALLEY TECHNICAL AND VOCATIONAL COLLEGE

P.O BOX 152 -30700, ITEN. KENYA

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EMAIL:keriovalleytti@gmail.com

APPLICATION FORM FOR ADMISSION

First Name: Middle Name: Last Name:

Gender: Date of Birth: Marital Status:

Religion (Tick one): Christian..... Muslim..... Hindu..... None Religion.....

Nationality: ID No/Passport: Home County:

Home District: Home Town:

Postal Address: Postal Code: Town: County:

Email: First Mobile No: Parent/Guardian No:.....

Course applied for:

The mean grade attained in the last exam:

KCPE Index Number (in full)	Year	KCSE Index Number (in full)	Year

Please attach copies of the following;

1. Academic and professional certificates i.e Form 4 & std 8.
2. National ID card (both sides)/National passport.
3. Birth certificate and leaving certificates.
4. Any other relevant certificates.

Sign: Date:

For official use

Received by: Date: Sign:

Recommended by: Date: Sign:

GENERAL REQUIREMENT

A) **ALL STUDENTS**

- ❖ Certified Medical Certificate (As per attached form)
- ❖ Photocopy of National Identity Card
- ❖ Photocopies of *ALL* academic certificate
- ❖ Copy of Leaving certificate/Birth certificate/Testimonials
- ❖ Original Certificates/Testimonials for confirmation and return
- ❖ Adequate writing materials
- ❖ Scientific Calculator
- ❖ Passport Photo

B) **CHANGE OF COURSE**

- Students admitted have **28 (twenty-eight)** days from the commencement date of the Programme to apply for change of course.

C) **COLLEGE ACCESS**

- The **college physical address**: 62 KM FROM KAPSOWAR TOT SUB COUNTY.
- May I wish you a save journey Kerio Valley TTI and success in your course.

Mr. Johnstone Lobillaghan

PRINCIPAL/BOG SECRETARY