

# THE CO-OPERATIVE UNIVERSITY OF KENYA

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# **APPLICATION FOR DIPLOMA / CERTIFICATE PROGRAMMES**

Specify the Course applied for:									
.,	State how you got information a  1) Newspaper  3) Member of staff  5) Any other		☐ 2) Forme ☐ 4) Currer (State it	er student nt student					
(ii)					her name and contact. o.)				
PLI 1.	PERS	SE BLOCK LETT							
	(i) (ii)	SURNAME	FIRST N	AME	MIDDLE NAME				
	(iii)	Sex (Tick one)	Male	Fe	emale				
	(iv) (v) (vi)	Marital status  Nationality	Married		ngle				
	(vii) (viii)	Current Address		C	ode				
	(ix) (x)	Email			tably Vac D No D				
2.	(xi) Continuing student (current Certificate) (Tick appropriately): Yes   PROFESSIONAL QUALIFICATIONS:								
	(i)								
	COU	AV	RTIFICATE VARDED	YEAR	ADMISSION NO.				
	(a)								



CUK is ISO 9001: 2008 Certified

# DIPLOMA/CERTIFICATE APPLICATION FORM-CUK/ASR/FORM 11

NAM	ACADEMIC QUALIFICATIONS: NAME OF SCHOOL							
ADDRESS								
YEA	R							
	E RESULTS:		00405					
	JECT:		GRADE:					
MEA	N GRADE							
(i) (ii) (iii) (iv) (v)	Date of 1 <sup>st</sup> Appointment Present Post	nent	s?					
(vi)								
	SPONSORSHIP AND AUTHORIZATION: Name and Address of Sponsor							
I her	I hereby certify that Mr./Mrs./Miss							
	Is our employee. He/She has been nominated to attend a							
Nam	e of official making th	ne nomination: Designation/Position	Signature	Date				

### DIPLOMA/CERTIFICATE APPLICATION FORM-CUK/ASR/FORM 11

### 6.NOTES:

- (i) Registration fee of Ksh. 500/= will be charged for each applicationmade.
- (ii) Applicants **MUST** attach photocopies of academic and professional certificates and National ID card.
- (iii) 2 passport size photographs (Not photo me)

FOR OFFICIAL USE ONLY: APPLICATION RECEIVED ON	
OFFICIAL RECEIPT NO	DATE:
REMARKS	

APPLICATION FORM SHOULD BE RETURNED TO: Registrar, Academic Affairs The Co-operative University of Kenya P.O. Box 24814 -00502 KAREN – NAIROBI

Approved by: D.B. OTIENDE

Registrar, AA