

APPLICATION FORM

NAM	E (CAPITAL)				
(SURNAME)			(OTHERS)		
DATE OF BIRTH				GENDER	
NATI	ONAL ID NO. (For citizen)				
PASS	SPORT No. (For non- citizen)				
	NTRY CITY				
	UPATION				
	GION				
KLLI					
	P. O. Box		⊏.		
	TOWN				
TEL/ No			MOBLE No		
	EMAIL EDDRESS				
	NEXT OF KIN NAME			MOBLE No	
	COURSE APPLIED FOR				
APPL	ICATION REQUIREMENTS				
INITIAL APPLICANT			CONVERSION STUDENTS		
No.	Document	N	0	Document	
1	Application form	1		Application form fully filled	
2	4 passport photos (2 by 2.5cm)	2		2 passport photos	
3	Copy of ID or pass port	3		Copy of ID or pass port	
4	Copy of medical certificate	4		Copies of licenses held	
5	Copy of SPL	5		Copies of the last two pages of logbook	
6	Academic qualification	6		Certificate of good conduct	
7	Certificate of good conduct	7		Academic qualification	
8	Insurance certificate	8 9		Copy of medical certificate Insurance certificate	
		9		Trisurance certificate	
I cer	LARATION tify that the information given in			correct to the best of my knowledge	
For c	official use only.				
Reco	mmended	Not Recomr	ne	nded	
Com	ments				
Sign	ed				
Date					