

ADMISSIONS REGISTRATION FORM (for new students)

NAME: ADM NO.:
(Surname) (Other names)
STATE IF KUCCPS/PSSP: COURSE:
YEAR OF STUDY: SEMESTER: DATE REPORTED:
CAMPUS:
STAGE 1: ADMISSIONS OFFICE (CONFIRMATION OF ELIGIBILITY)
Tick as appropriate
K.C.S.E Certificate/Result Slip Original Admission Letter Original I.D. Card/Birth
Certificate
Any other Academic Qualifications Secondary Living Certificate
Receiving Officer: Sign: Stamp
STAGE II: FINANCE DEPARTMENT (PAYMENT OF FINANCIAL DUES)
CONFIRMATION OF: (i) Fee Due Kshs (In words)
(2) (2) (2) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4
Name of officer Sign Stamp
RECEIVING CASHIER
Fee paidKshs Fee Balance Kshs
Bank slip Ref No Bank Date
Name of officer Sign Stamp
FINANCE OFFICER
For Clearance
Name of Officer Date/Stamp Sign

STAGE III: DEAN OF STUDENTS Submitting of one copy of student details form (FORM/ASA/020-5)		
Name of Officer	Date/Stamp Sign	
STAGE IV: HEALTH SERVICES DEPARTMENT (COLLECTION OF MEDICAL FORMS)		
Submitting of medical form (FORM)	1/HS/017_1\	
Submitting of medical form (I OKIVI	(/IIS/017-1)	
Name of Officer	Date/Stamp Sign	
STAGE V: SIGNING OF NOMINAL ROLL (SCHOOL)		
Submitting of one copy of Student Details form (FORM/ASA/020-5)		
Name of Officer	Data/Stamon Simon	
Name of Officer	Date/Stamp Sign	
STAGE VI: HOSTEL DEPART	MENT	
Submitting of room allocation form		
	Bank:	
<u> </u>	Date/Stamp Sign	
If Non-Resident, (Fill Non Residence Form)		
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STAGE VII: CAMPUS CARD (Processing of Campus Card)		
Name of Officer	Date/Stamp Sign	