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|-----------------------|----------------------|
| For official use only |                      |
| APPLICATION           |                      |
| SERIAL NO.            | <input type="text"/> |

## LIMURU TECHNICAL AND VOCATIONAL COLLEGE

P.O Box 1584-00217, LIMURU, Cellphone: 0708 652364

Email: [limurutvc@gmail.com](mailto:limurutvc@gmail.com)

### APPLICATION FORM

#### SECTION A: TRAINEE PERSONAL DATA

|                               |                |         |  |
|-------------------------------|----------------|---------|--|
| SURNAME:                      | OTHER NAMES:   |         |  |
| PASSPORT/ID NO:               | DATE OF BIRTH: |         |  |
| HOME COUNTY:                  | Mobile No:     |         |  |
| POSTAL ADDRESS:               | Email:         |         |  |
| GENDER ( Tick appropriately): | MALE:          | FEMALE: |  |

#### SECTION B: COURSE DATA

|  |                                       |                                       |                                       |
|--|---------------------------------------|---------------------------------------|---------------------------------------|
| COURSE APPLIED FOR:                    |                                       |                                       |                                       |
| KCSE Mean Grade:<br>OR<br>KCPE Points: | MODE OF STUDY<br>(Tick appropriately) | FULL TIME<br><input type="checkbox"/> | PART-TIME<br><input type="checkbox"/> |
| INTAKE PERIOD (Tick appropriately):    | JANUARY<br><input type="checkbox"/>   | MAY<br><input type="checkbox"/>       | SEPTEMBER<br><input type="checkbox"/> |

#### SECTION C: ACADEMIC PROFILE DATA

##### PREVIOUS INSTITUTIONS/SCHOOLS ATTENDED

| NAME OF INSTITUTION/SCHOOLS ATTENDED | LEVEL | FROM | TO |
|--------------------------------------|-------|------|----|
|                                      |       |      |    |
|                                      |       |      |    |
|                                      |       |      |    |

APPLICANTS' SIGNATURE: .....DATE: .....

#### SECTION D: FOR TRAINEES CONTINUING TO THE NEXT MODULE ONLY

##### TO BE COMPLETED BY THE RESPECTIVE HOD

STATUS OF PREVIOUS MODULE.....

HOD Name..... Signature..... Date & Stamp.....

##### NB:

1. ALL New trainees **MUST** attach copies of KCPE, KCSE, National Identity Card and Birth Certificate,
2. Continuing trainees **MUST** attach a copy of Certificate or Result Slip for the Previous Module.
3. Non-Refundable Application fee of Ksh 500 to be paid in the College bank account: KCB, Limuru Branch, Ac Name- Limuru Technical & Vocational College, Ac No. 1275016464. Bank Slip **MUST** accompany the Application form.
4. Application to be sent or hand delivered to:

THE PRINCIPAL

LIMURU TECHNICAL AND VOCATIONAL COLLEGE

P.O BOX 1584-00217, LIMURU