



Department..... School.....

Mode of Study: Full time  Part time

9. How will your studies be financed? (Mark X in the appropriate box)

Self-financed  Scholarship

Name of Sponsor..... Email.....

Address..... Tel.No.....

10. Have you ever been registered in a related or same level programme? YES  No

If Yes, Name of University/College.....

Year studied..... Reg. No.....

**SECTION B: (EDUCATION AND WORK EXPERIENCE)**

11. Previous Education (Enclose certified copies of Certificates and Transcripts):

Dates From/To	Name and Address of Institution	Field/Subjects Studied	Qualifications Obtained
.....to.....	a) Secondary		
.....to.....	b) Post-Secondary		

12. Employment (Enclose Curriculum Vitae):

Dates From/To	Name and Address of Employer	Exact description of your duties/Teaching subjects
.....to.....		
.....to.....		



**Vision:** A University for Valued Transformation of Society

**Mission:** To serve students and society through research, education, scholarship, training, innovation, outreach and consultancy

Laikipia University is Certified to ISO 9001:2015 and ISO/IEC 27001:2013

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Revision 00



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13. Indicate which campus you intend to pursue your studies Laikipia (main) or Nakuru Campus.

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14. Academic Referees, one must have taught you at Post-Secondary/University Level

a) Name.....Designation.....

Address.....Tel No.....

Email address.....

b) Name.....Designation.....

Address.....Tel No.....

Email address.....

c) Name.....Designation.....

Address.....Tel No.....

Email address.....

15. Applicants' Signature .....Date.....

**SECTION C (FOR OFFICIAL USE ONLY)**

16. Recommendation from the department

a) Forwarded to the department of ..... on Date.....

b) Recommendation of the department: Accepted  Rejected

c) Comments.....

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d) Chairman/Chairpersons' Signature .....Date.....

17. Recommendation from the School

a) Forwarded to the School of ..... on Date.....



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b) Recommendation of the Dean of School : Accepted  Rejected

c) Comments.....  
.....  
.....

d) Deans' Signature .....Date.....

a) **Recommendation from the Graduate School**

b) Forwarded to the Graduate School on Date.....

c) Recommendation of the Director : Accepted  Rejected

d) Comments.....  
.....  
.....

e) Director- Graduate School: Signature .....Date.....

**18. Admission by Registrar (AA)**

a) Forwarded to the Registrar (AA) on Date.....

b) Approval by Registrar (AA): Approved  Not Approved

c) Comments.....  
.....  
.....

d) Registrar (AA)'s Signature .....Date.....

