



**CHUKA**

**UNIVERSITY**

**AFFIX CURRENT  
PASSPORT  
PHOTO HERE**

Telephone: 020 2310512  
0202329073

P.O Box 109 -60400  
**CHUKA**

Fax line: 020 2310302

## **OFFICE OF THE REGISTRAR ACADEMIC AFFAIRS**

**APPLICATION FORM FOR SELF-SPONSORED UNDERGRADUATE DEGREE \_\_\_\_\_ DIPLOMA \_\_\_\_\_ AND  
CERTIFICATE \_\_\_ PROGRAMMES (tick as appropriate)**

### **NOTES:**

- a) This form should be completed and returned to the REGISTRAR (ACADEMIC AFFAIRS), CHUKA UNIVERSITY, P.O. BOX 109 -60400, CHUKA, on or before the closing date as advertised.
- b) Sections A, B, C and D of this form should be completed in Block Letters.

### **Ensure that you attach the Following;**

- c) Certified copies of your Result Slip, Certificates and Transcripts.
- d) ORIGINAL RECEIPT (Application Fee): KShs. 2,000 for ALL Degree Programmes, Kshs. 2,000 for all Undergraduate Diploma Programmes and Kshs. 1,000 for All Certificate Programmes: Payable to; Account Name; Chuka University , Kenya Commercial Bank; Account No: 1103755439 OR Cooperative Bank; Account No: 01129058189900.
- e) Copy of your National ID card or Birth Certificate.

### **SECTION A: PERSONAL DATA**

Name: .....  
(Surname) (Other names in full)

Date of Birth: ..... Sex: ..... Marital Status: ..... Religion: .....

Nationality		ID/Passport No	
County		Phone No	
District		P.O. Box	
Constituency		Town	
Email address		Postal Code	

**SECTION B: ACADEMIC HISTORY**

a) Secondary School Attended	Year	Grade
Other Relevant Qualifications		
b) Institution Attended	Year	Qualification/Award

c) State any relevant academic/professional qualifications or experience.....  
 .....

**SECTION C: CHOICE OF COURSES**

State the course(s) for which you wish to be considered for admission.

State whether you are applying for Degree/Diploma/Certificate : _____				
Write below, the title of the Course(s) you are applying for;	Mode of Study			
	SSP Regular	Evening	Weekend	Sch. based Mode
First: _____				
Second: _____				
Preferred Campus (Chuka, Embu Town, Igembe ): _____				

a) Have you ever been admitted to Chuka University College previously (YES/NO)? \_\_\_\_\_

If YES, indicate the previous Registration number.....

Give reasons for applying afresh .....

Indicate how you intend to finance your studies.....

**SECTION D: DECLARATION**

I certify that the information given in this application form is correct to the best of my knowledge

Sign.....Date.....

b) Name of Employer (if any).....

Recommendation .....

Designation.....Sign.....

*Official Stamp*

**SECTION E: FOR OFFICIAL USE ONLY**

a) **Recommendation of the Head of Department (Recommended\_\_\_\_ Not Recommended\_\_\_\_)**

Comments.....

Sign.....Date.....

*Official stamp*

b) **Recommendation of the Dean of Faculty (Recommended\_\_\_\_ Not Recommended\_\_\_\_)**

Comments.....

Sign.....Date.....

*Official stamp*

c) **Recommendation of the Deans Committee (Recommended\_\_\_\_ Not Recommended\_\_\_\_)**

Comments.....

Sign.....Date.....

*Official stamp*

d) **Approval by Registrar (AA)**

Sign.....Date.....

*Official stamp*

