



OFFICE OF THE REGISTRAR (ACADEMIC, RESEARCH & STUDENT AFFAIRS)

CHECKLIST FOR NEW STUDENTS

PART A. PERSONAL INFORMATION

Name: Registration No:
School:
Programme:
Academic Year: Campus:
Year of Study: e.g. (1st, 2nd)..... Semester: e.g. (1st, 2nd).....
Entry intake: e.g. (August 2019)
Mode of Study: (*tick appropriate*) Full Time Weekend Evening Part time
National ID (B/C) No: NHIF Member No:
Contact Address: P.O Box: Postal Code: Town:
Phone No: Email: County:
Signature: Date: (dd/mm/yy):

(For Official Use)

PART B. ADMISSIONS (VERIFICATION OF ACADEMIC AND ADMISSION DOCUMENTS):

Students National ID/BC No: Admission Letter: KCSE Certificate/Result Slip:
Other Relevant Academic Documents:
Name of Verifying Officer:
Signature: **Date: (dd/mm/yy)**.....
(Stamp)

PART C. STUDENT FINANCE:

Name of the Receiving Officer:
Signature: **Date: (dd/mm/yy)**.....
(Stamp)

PART D. HOSTEL ROOM ALLOCATION:

Resident: Hostel Name: Room No:
(Complete a resident form AA/F018)
Nonresident: Place of Residence: (Complete a non-resident form AA/F017)
Name of the Issuing Officer:
Signature: **Date: (dd/mm/yy)**.....
(Stamp)

PART E. MEDICAL DOCUMENTS:

Name of the Receiving Officer:
Signature: **Date: (dd/mm/yy)**.....
(Stamp)

PART F. LIBRARY DEPARTMENT:

Name of the Receiving Officer:
Signature: **Date: (dd/mm/yy)**.....
(Stamp)

PART G. STUDENTS ID PHOTO

Photo Reference No: Name of Recording Officer:

PART H. SIGNING OF NOMINAL ROLL:

Name of the Verifying Officer:
Signature: **Date: (dd/mm/yy)**.....
(Stamp)

(The duly completed checklist MUST be submitted to the Admissions Office for filing)