



MINISTRY OF EDUCATION

STATE DEPARTMENT OF VOCATIONAL AND TECHNICAL TRAINING

KERICHO TOWNSHIP TECHNICAL & VOCATIONAL COLLEGE

P O BOX 828-20200, KERICHO-KENYA Tel: +254713107307 www.kerttvc.ac.ke,

Email: keritownshiptechnical@gmail.com

2km off John Kerich – Keongo Rd.

COURSE APPLICATION FORM

COURSE APPLIED FOR IN FULL (State course, whether Artisan/ Craft/diploma)

A. PERSONAL DETAILS

SURNAME

FIRST NAME

OTHER NAMES

DATE OF BIRTH (dd/mm/yyyy)

GENDER

NATIONALITY

ID NO.

PHONE NO

POSTAL ADDRESS

POSTAL CODE

TOWN

COUNTY

B. ACADEMIC QUALIFICATION

CERTIFICATE	SCHOOL/COLLEGE ATTENDED	INDEX NUMBER	YEAR SAT	MEAN GRADE QUALIFICATION
KCPE				
KCSE				
CRAFT				
DIPLOMA				

C. SPONSOR/GUARDIAN DETAILS

FULL NAMES

POSTAL ADDRESS

POSTAL CODE

TOWN

RELATIONSHIP TO APPLICANT

EMAIL ADDRESS

MOBILE NUMBER

OCCUPATION

D. NEXT OF KIN DETAILS

FULL NAMES

POSTAL ADDRESS

POSTAL CODE

TOWN

RELATIONSHIP TO APPLICANT

EMAIL ADDRESS

MOBILE NUMBER

OCCUPATION

Declaration

I confirm that the information given above is correct to the best of my knowledge and take full responsibility for any incorrect information.

Sign _____ date _____

Attach the following copies of testimonials

- Results slip/certificate

For further inquiries call or write to the Principal, Kericho Township Technical