

CHUKA



UNIVERSITY

AFFIX CURRENT
PASSPORT PHOTO
HERE

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CHUKA

STUDENT'S PERSONAL DETAILS

Information provided in this form is essential in establishing a complete record of the student in the Registrars' Office.

(To be completed in quadruplicate and capital letters, spelling all names in full)

1. Full name (As it appears in ID/Birth Certificate)

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First Middle Last / Surname

2. National ID No. or Birth Certificate No. : Telephone.....

3. University Admission Number: Year of Study:

Course of Study: Student email address.....

4. Date of Birth: Religion:

5. Home Contact Address:

6. Marital Status: Spouse & Telephone (if Married):

7. Full Name of Mother: Deceased /Alive (tick one)

8. Full Name of Father: Deceased /Alive (tick one)

9. Full name of Guardian (if neither 7 nor 8)..... Telephone

10. (a) Occupation of the Father: Deceased /Alive (tick one)

Contact: Telephone Number.....

(b) Occupation of the Mother: Deceased /Alive (tick one)

Contact: Telephone Number.....

(c) Occupation of Guardian (if neither (a) or (b): Telephone

11. Name of brother(s) and sister(s) and addresses (Attach additional sheet of paper if necessary)

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12. Place of permanent residence: Village.....

Nearest town: Location: Name of Chief:

Chief's Signature..... Chief's Telephone..... Chief's stamp.....

Name of Assistant Chief: Telephone.....

Sub-County: County:

Name of County Commissioner: County Commissioner's signature.....

Date: Official Stamp:

13. Place of birth (if Different From 12 above)

Village:..... Name of Chief: Telephone.....

Location: Sub-County:

County:

FOR OFFICIAL USE ONLY

Name of Dean of Faculty/Registrar (Academic Affairs):

Signature: Date:

