

UNIVERSITY OF KABIANGA

Affix a passport photo here

STUDENT'S PERSONAL DETAILS

Information provided in this Form is intended to help the Office of the Deputy Vice Chancellor, Academic and Student Affairs understand the students better. It will be used for the purposes of improving the student's welfare while at the University (To be completed in quadruple (4 copies) and in **CAPITAL LETTERS**. Attach a coloured passport size photograph taken on a **Blue background** on each form.(**NOT FROM A "PHOTO ME" MACHINE**)

1. Full Name: (Surname or last Name) _____ (Mr., Mrs., Miss)

(Other Names)
- 2 National Identity Registration No. (ID) _____ District _____
- 3 Admission Number _____
- 4 Date of Birth _____
- 5 Religion _____
- 6 Nationality _____
- 7 Home Contact Address _____
Student's Tel.No. _____
- 8 (a) Marital Status _____
(b) Name and address of Spouse (if married) _____
(c) Occupation of Spouse _____
(d) Number of Children _____
- 9 Full name of Father _____ Deceased/Alive
- 10 Full name of Mother _____ Deceased/Alive

11. (a) Occupation of Father _____ Date of Birth _____
 (b) Occupation of Mother _____ Date of Birth _____
12. Guardian _____ (Where 9 and 10 above is not applicable)
13. Number of brothers and sisters _____
14. Place of birth: Village/Town _____
 Location _____ Name of Chief _____
 Division _____ District _____ County _____
15. Place of Permanent Residence: Village/Town _____
 Nearest Town _____ Location _____ Name of Chief _____
 Division _____ District _____ County _____
16. Give names and address of two persons who can be contacted in case of an emergency.
- (a) Name _____ Relationship _____
 Address & Tel. No. _____

- (b) Name _____ Relationship _____
 Address & Tel. No. _____

17. Name and address of School attended for 'O' Level _____
 _____ Year completed _____
18. K.C.S.E Results (Subject and Grades)

 _____ Index Number _____
19. Any other Institution attended and qualifications attained

20. Games/Sports: which games are interested in?

21. Clubs, Societies and Hobbies. Which clubs, societies and hobbies are you interested in?

22. Do you suffer from any physical impairment? If so give details

23. Please give any information you think is useful for you to communicate to the University. _____

I certify that the information I have provided is correct.

Signature _____ Date _____

