



TECHNICAL UNIVERSITY OF MOMBASA
Office of the Registrar (Academic Affairs)



COURSE APPLICATION FORM

Course Applied:

In the Department of

CAMPUS (KWALE, LAMU, MAIN).....

First Name.....Middle Name.....

Surname (Last Name) Title (Mr., Ms. Mrs., Miss) Gender (M/F).....

Date of Birth..... ID/Passport No

County..... District.....

Name of parent or guardian.....

Permanent-address..... Phone-Number.....

Contact address..... Town.....

Applicant's Phone Number..... Email

Index No./Old Reg. No..... Nationality:..... Marital status.....

ACADEMIC BACKGROUNDS

INSTITUTION ATTENDED	DATES		QUALIFICATIONS (Attained)
	From (Year)	To (Year)	

DO YOU HAVE ANY PHYSICAL CHALLENGES Yes No

Working Experience

Name of Organization (Start with current)	Post Held	Dates From(year) To (year)

NB: Attach copies of the relevant certificates, ONE recent passport size photograph, Copy of National ID/Birth Certificate copy, Application fee receipt copy and any testimonial(s)

SPONSORSHIP

Sponsor (Self, Parent, Organization), *Write the name*.....

Address of sponsor.....**Town**

Phone Number.....**Fax**.....

TERMS AND CONDITIONS OF ADMISSION.

- 1 . Attach a copy of the **application payment receipt** of a non-refundable fees of Kshs **2,500/=** for PhD, Kshs **1,500/=** for Masters, Kshs **1,000/=** for Bachelors and Kshs **500/=** for Diploma & Certificate course.

Fees must be paid in accordance with the fee schedule through the below Bank accounts. Please attach the bank-slip-

- Cooperative Bank of Kenya (Nkrumah) Acc. No 0112979001600**
- Standard Chartered Bank (Treasury Square) Acc. No. 010292728000**
- Equity Bank (Digo Road Branch) Account No. 0460297818058**
- National Bank (T.U.M. Branch) Account No. 01038074211700**
- Barclays Bank (Nkrumah Road) Account No. 2034098894**
- KCB (Mvita Branch -Msa) Account No. 1169329578**
- KCB (Lamu Campus) Account No. 1118817192**

- Students should have paid 50% of the 1st Semester fees of the course to be allowed in class
- A Copy of this form to be completed with the accurate details and returned to the Registrar of Technical University of Mombasa, P. O. Box 90420-80100, Mombasa or email: registrar.aa@tum.ac.ke or vc@tum.ac.ke or drop your applications at the Technical University of Mombasa- Admissions Registry.
- The dully completed forms should be returned on or before the last registration period

DECLARATION

I, declare that the information given in this application form is correct. I further certify that I have read, understood and agreed to comply with the terms stipulated herein.

Sign. **Date**.....

FOR OFFICIAL USE ONLY

DATE	SELECTED (Qualified)	REJECTED (Does not Qualify)	PENDING Missing Docs.

Name of CoD..... **Sign:** **Date:**

Year of Study **Semester**

Name of Dean of Faculty/School..... **Sign**..... **Date**.....