



TECHNICAL UNIVERSITY OF MOMBASA

Document: Form

Ref No.: TUM/Form/RAA/007

Title: COURSE APPLICATION FORM

Department: REGISTRAR ACADEMIC AFFAIRS

Issue No. 2

Revision No. 0

Date: 5th April 2018

PASSPORT PHOTO

Course Applied:

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/DISABILITY Yes

No



Working Experience

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

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 KES **2,500/=** for PhD, KES **1,500/=** for Masters, KES **1,000/=** for Bachelors and KES **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:-

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

2. Students should have paid 50% of the 1ST Semester fees of the course to be allowed in class
3. 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.
4. The dully completed forms should be returned on or before the last registration period

DECLARATION

Ideclare 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	SELEC TED (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**.....

