APPLICATION FORM

COURSE APPLIED:			
APPLICATION DATE:		**MEAN GRADE:**	
MODE OF STUDY:	**FULL TIME:** ☐	**OFF CAMPUS:** ☐	
NAME:			
	(Surname, First, Middle)		
GENDER:	**MALE** ☐ **FEMALE** ☐	**ID NUMBER:**	
ADDRESS:			
MOBILE NUMBER:		**DATE OF BIRTH:**	
COUNTY :		**LOCATION:**	
SUB-COUNTY:		**SUB-LOCATION:**	
KCSE INDEX NO:		**YEAR:**	
KCPE INDEX NO:		**YEAR:**	
STUDY CAMPUS:	**MAIN :** ☐ **TOWN:** ☐ **MATURU:** ☐		
PARENT/GUARDIAN NAME:			
PARENT ADDRESS:			
MOBILE NUMBER:			
NEAREST PRIMARY SCHOOL:	:		

How did you learn about us

Newspaper [ ]   Radio [ ]   Sigalagala Student [ ]   Career Guidance [ ]   Social Media [ ]

Public Exhibitions [ ]   Referrals (name where applicable)…………………

Applications attached with copies of;
i)   KCPE and KCSE result slip
ii)   Birth Certificate
iii)   National ID card
iv)   2 passport size coloured photos
v)   Deposit slip of ksh.500/= Application fee(non-refundable)

Applications Addressed to: **REGISTRAR** SIGALAGALA NATIONAL POLYTECHNIC
P.O BOX 2966-50100, KAKAMEGA. **MOBILE: 0793600519**
Email: registrar@sigalagalapoly.ac.ke **Website**: sigalagalapoly.ac.ke

Polytechnic Bank Accounts No : Barclays Bank: -   **8043551**
Equity Bank:-   **0500277394606**
MPESA PAYBILL No: **908008**
Town Campus Bank Account: Cooperative Bank **: 01120098473700**

Maturu Campus Bank Account: Cooperative Bank **: 01139098473700**