COAST INSTITUTE OF TECHNOLOGY

REGISTRATION FORM

Note (to be filled in BLOCK letters)

1. **PERSONAL DATA**
   a) **Name (Surname First)**…………………………………………………………………………………………..
   b) **National ID**……
   c) **Admission Number (to be given)**……………………………………………………………………………
   d) **Postal Address**…………………………………………………………………………………………………….
   e) **Student's Next of Kin**…………………………………………………………………………………………..
   f) **Relationship to Kin**………………………………………………………………………………………………
   g) **ID No to Kin**……
   h) **Mobile No of Kin**………………………………………………………………………………………………
   i) **Mobile No of Student:** ……………………………………………………………………………………….
   j) **County** …………………………………………………Sub County…………………………………….Ward………………………..
   k) **Year of birth**……
   l) **Academic year**………………………………………… Month………………………….. Date………………………….

2. **COURSE DETAILS**
   a) **Department** ……
   b) **Course Admitted To**……………………………………………………………………………………………
   c) **Course Level**………………………………………………………………………………………………………
   d) **Duration Years/Terms**………………………………………………………………………………………….

3. **EDUCATIONAL BACKGROUND**
   a) **High School Attended**…………………………………………………………………………………………
   b) **Grade Attained**……………………………………………………………………………………………………
   c) **Minimum Grade Required for the Course** ………………………………………………………………………………
   d) **Any Other Professional Training**……………………………………………………………………………………

4. **RESIDENCE INFORMATION**
   a) **Residence Student {   } Non Resident Student {   }**
   b) **If Non Resident Where Is The Residence**………………………………………………………………….
   c) **Any Medical Condition**…………………………………………………………………………………………

5. **PERTINENT INFORMATION**
   Game(s) Played …………………………………………………………………………………………………….
   Club(s) Interest ……………………………………………………………………………………………………
   Declaration by Student:
   I hereby certify that the information I have given is true to the best of my knowledge.
   Student Name ……………………………………………………… **Witness Name** …………………………………………….
   Signed ………………………………………………................... **Signed** ……………………………………………………
   Date……………………………………………………………………….**Date**………………………………………………

   Official Use Only (Admission Officer)
   I have certified that:
   a) **ID b) Results slip and Certificates) Photographs d) Medical form and all other course requirements have been met and therefore the student has been admitted.**
      Signature……
      Date …….
      Title……..
      Stamp……