

+254 705 985418

admin@idiacollege.ac.ke



## APPLICATION FOR ADMISSION

	APPLICATION FOR ADMISSION
	This form should be filled in block capitals. Ensure you have fully read the relevar prospectus for the course applied for before filling this form.
hree Passport Size Photographs	NAME OF THE COURSE APPLIED FOR:
	COMMENCING (DD/MM/YR):
	A. GENERAL INFORMATION
NAME: (SURN	NAME FIRST)
	ales as preferred to appear on the certificate)
DATE OF BIRT	TH (DD/MM/YR) SEX: (M/F)
PASSPORT/	IDENTITY CARD NO: (Please specify)
	e Copies of either both sides of the applicant's ID OR the first three pages of
the applicant'	s passport must be attached to the application)
PERMANENT	HOME ADDRESS:
ADDRESS FC	DR CORRESPONDENCE: (If different from above)
	E:HOME:OFFICE:
TELEPHONE	
MOBILE NUN	IBER/FAX EMAIL ADRESS:
	B. EDUCATION/PROFESSIONAL BACKGROUND
School examii relevant slip)	nations taken/to be taken (e.g. KCSE/GCSE,) (Please attach a Certificate Copy of the
YEAR SAT:	AGGREGATE RESULT:
	ofessional Course(s) taken: h Certified copy of award where applicable)
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Work experience where applicable (giving most recent employer first):

Employer 1:						
Position:	osition:Duration:					
Employer 2:						
Position:	Durati	ion:				
C. P/	RENT/ GUARDIAN/SPON	SOR'S DETAILS				
NAME:						
ADDRESS:						
TELEPHONE:	HOME:	OFFICE <u>:</u>				
MOBILE NO/FAX	EMAIL:					
NAME:						
		OFFICE:				
	EMAIL:					
	E. ATTACHMEN	ITS				
Please ensure that you have	e attached certified copies of th					
<ol> <li>Three Passport size Photog</li> <li>Certified Copies of Acader</li> <li>Photocopy of ID/ or Passp</li> </ol>	nic Certificates					
Ensure you get the official re	eceipt for the application form.	(Attach Receipt to the Application form)				
Receipt No						
Serial No.						

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## F. MEDICAL HISTORY

Indicate any medical ailment/ allergies that the school should be aware of, in case of an emergence

SIGNED:	DATE:	

G. FURTHER INFORMATION						
How did you find out about the course you have applied	for (tick where applicable)?					
1) IDIA Brochure/Prospectus						
2) Daily Newspaper						
3) Professional Publication						
4) Exhibition/School visits						
5) Students of IDIA (indicate current/ former)						
6) Friends						
7) Relatives						
8) Radio						
9) IDIA Employee						
10) Business Colleague						
11) Other (please give details)						

## H. TERMS AND CONDITIONS & MODE OF PAYMENT

1. An Application Fee: KES. 1,000/= Certificate and Diploma Courses. The fee is Non-Refundable and it is payable upon submission of Application Form.

2. All Payments should be channeled to the Bank Account as indicated below:

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A/C Details International Development Institute –Africa LTD Co-operative Bank of Kenya, A/C NO:01129256704900, Ongata Rongai Branch.

3. Fee once paid is neither refundable nor transferable under any circumstances. Application Form.

## I. DECLARATION

I hereby declare that all information submitted on the application form, and materials attached in support thereof are true, correct and complete to the best of my ability and knowledge, and that all required information has been disclosed.

SIGNED:		DATE:						
J. OFFICIAL USE ONLY								
Application Approved		Application Not Approved						
Remarks:				-				

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