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MAASAI MARA UNIVERSITY

OFFICE OF THE REGISTRAR (ACADEMIC AFFAIRS)

PRIVATELY SPONSORED STUDENTS PROGRAMME (PSSP)

APPLICATION FOR ADMISSION FORM

(Certificate, Diploma and Undergraduate Programmes)

- This form should be completed in **BLOCK LETTERS** and returned to the **Admissions Office, Maasai Mara University P.O. Box 861 – 20500, NAROK**.
- Attach copies of your academic and professional certificates, transcripts and where applicable, your current appointment letter.
- Attach copies of your national identity card, passport or birth certificate.
- Duly completed forms must be returned with a payment of a non-refundable application fee of **Ksh. 1,000** for Degree programmes and **Ksh. 500** for Diploma and Certificate programmes. Payments should be deposited into any of the following accounts: Co-operative Bank Ltd, Narok Branch (**01129337192600**) or Equity Bank, Narok (**0360292999764**). Original bank pay-in slip, **MUST** be attached to the application form.

SCHOOL OF

I. PERSONAL DATA

1. APPLICANT'S NAME:
 (Surname Middle Name First Name)

2. CONTACT (POSTAL ADDRESS) POSTAL CODE.....
 TELEPHONE E-MAIL.....

3. DATE OF BIRTH GENDER: MALE FEMALE

4. NATIONALITY NATIONAL ID. / PASSPORT NO..... COUNTY.....

5. MARITAL STATUS:

6. DEGREE/DIPLOMA/CERTIFICATE APPLIED FOR
 (E.g. Business Management, Social work, etc)

7. CAMPUS

8. ACADEMIC YEAR..... INTAKE
 (e. g. 2011/2012) e.g. January, April, May, August

9. MODE OF STUDY : (Tick as appropriate)

Full- time Part-time Evening Weekend Holiday

10. RECORDS OF SECONDARY EDUCATION (Attach copies of Result slips and Certificates)

SCHOOL	FROM(YEAR)	TO (YEAR)	CERTIFICATE	OBTAINED

11. POST SECONDARY EDUCATION (Attach Copies of Results Slips and Certificates)

INSTITUTION	FROM(YEAR)	TO (YEAR)	AREA OF STUDY	QUALIFICATIONS

12. WORK EXPERIENCE

JOB TITLE	EMPLOYER	FROM	TO

13. FINANCES

Please indicate how you intend to finance your study (Tick as appropriate)

Private finance source Other financial sources

14. AWARENESS

How did you learn about Maasai Mara University? Please tick appropriately.

Newspaper Former/ Current student Radio Television

University Website Employee of the University (Indicate name).....

Commission for University Education Exhibitions Other Exhibitions (Specify).....

Others (Please Specify)

XI EXEMPTIONS (To be filled by applicants who wish to be considered for Exemptions)

Please specify the qualifications which the exemptions will be based;

Diploma /Higher National Diploma Professional Qualifications e.g. CPA

Other (Please specify).....

I certify that the information given in this form is correct to the best of my knowledge.

Signature of Applicant Date

<p>FOR OFFICIAL USE</p> <p>a) Dean of School</p> <p>Admission recommended/Not Recommended</p> <p>If not recommended, state reasons:</p> <p>Programme</p> <p>To begin in Year Semester</p> <p>Comments, if any</p> <p>Dean’s Name SignatureDate.....</p> <p>b) Registrar (Academic Affairs)</p> <p>Admission Approved/ not Approved.....</p> <p>Comments, if any</p> <p>Registrar’s Signature Date.....</p>
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