KCAU PROFESSIONAL AND TECHNICAL TRAINING INSTITUTE COURSE APPLICATION FORM

Complete **all** appropriate sections in **block letters** and return with your **non-refundable application fee, copies and originals** of your certificates and other supporting documents to: **Office of the Registrar, KCA University, P. O. BOX 56808-00200, NAIROBI KENYA.** TEL: 254-020 – 8561045/6177/803/8 FAX: 254-020-8561077, Mobile: 0710888022/0722869917 E-mail: registrar@kcau.ac.ke Website: www.kcau.ac.ke

> AFFIX 2 RECENT
>
> PASSPORT

Applicant's Name(s)

Surname	First	Middle

Date of Birth: Date / Month / Year / /	Female ☐ Male ☐	Religion:
Place of Birth:	Citizenship:	**Marital Status:** Single ☐ Married ☐
National ID No / Passport No:	Residential District:	Home Location:
County of Origin (Home County):	County of Residence at the time of admission:	Any Form of Disability Yes ☐ No ☐ **(Refer to Page 4 for details)**

Mailing Address/ Contacts

P.O. Box / Postal Code / Town	Mobile No(s). a) b)	Tel No. (office/house)	Email Address
/ /			

Next of Kin or Guardian's Details (Contacts in case of emergency)

1. Name …………………………………………….………..

Relationship to applicant…….……………………………

Employer …………………….………Designation ……………..

P.O. Box …………… Postal Code ………Town……..….…

Email address…….…….….……Telephone………....……

2. Name ………………………….………………….………..

Relationship to applicant…….……………………….……

Employer ……………….…………Designation ……………..

P.O. Box …………… Postal Code ………Town……..….…

Email address………………….…Telephone………....……

Contacts of other Family Member(s) (Contacts in case of emergency)

Name ……………………………….Relationship to applicant……………………… Telephone……………….............………

P.O. Box ………...Postal Code …………..Town ………………Place of Residence………………Email address……......……..

Course Applying for (Refer to the list in page 5) | **Name of Course:**

Guarantee of Fee Payment (tick where appropriate) Parent ☐ Guardian ☐ Self ☐ Sponsor ☐ Employer ☐

Name .... Contacts (Tel / Mobile) ....

Preferred Intake / Year: _____ **Mode of Study:**

January ☐ April ☐ May ☐ July ☐ September ☐ October ☐ Full time ☐ Part time ☐

Campus: Main / Ruaraka ☐ **City Centre / Town** ☐ **Kitengela** ☐ **Western** ☐

Have you previously registered with KCA?   If yes, give your KCA Registration Number, Course and Year of Graduation

Yes ☐   No ☐

| Reg. No. | Course: | Year Graduated: |

Education (please list last secondary school and colleges attended)

(School / College Name)	From	To	Course/Education (Level attained e.g. certificate, degree)	Grade/Award
Secondary/High School				
College/University a).				
b).				

Employment Details:

Current Employer Details

Company Name   Position (Title)   Work Experience (Duration From-To)   Address

………………………………   …………………………   ……………………………………………   ....

Previous Employer Details

Company Name   Position (Title)   Work Experience (Duration From-To)   Address

………………………………   …………………………   ……………………………………………   ....

List any talent or outstanding ability.

………………………………   …………………………   ……………………………………………

List any academic honours and awards, non-academic achievements such as sporting activities, community involvement and / or work experience over the last <u>10</u> years.

Academic achievements:	Extra-Curricular Activities:
Community Involvement:	Corporate Awards (achievement on exemplary job performance):

Relatives who have attended KCAU (if any)

Name ……………………………………….. Relationship …………………………Mobile No. ………………………………

Name ……………………………………….. Relationship …………………………Mobile No. ………………………………

How did you learn about KCA – <u>Tick one</u>

College Guide ☐   Newspaper ☐   TV ☐   Radio ☐   KCAU Website ☐

Exhibition ☐   Parent ☐   Relative ☐   Friend ☐   School Teacher ☐

KCAU Student ☐   KCAU faculty ☐   Mailing ☐   College/High School Fair ☐ KCAU alumnus/alumni ☐

Other (specify) …....................……………………………………………………………………………………..

Please indicate your sport and club of choice (tick your option/s)

Sport				Clubs			
Athletics	☐	Rugby	☐	First Aid Club	☐	Accounting Students Association	☐
Basketball	☐	Soccer	☐	Forum for IT Students	☐	Christian Union (CU)	☐
Hockey	☐	Volleyball	☐	Presidential Award	☐	Catholic Association (CU)	☐
Tennis	☐			Wildlife Club	☐	Seventh Day Adventist (SDA)	☐
Other (Specify)...				Entrepreneurship Club	☐	Peer Councillors Club	☐
				Students Initiative Against AIDS and Substance Abuse (SIAASA)	☐		
				Other (Specify)...			

- All forms **MUST** be **SIGNED** before returning them to the Admissions Office. **ORIGINALS and COPIES** of the following documents must be attached;

    1. National ID **or** Birth Certificate
    2. O level Certificate **or** Result Slip
    3. Academic Certificate **and** Transcripts
    4. One Colour Passport-size Photograph

- Application fees (**Kshs 1000**) can be deposited in **one** of the following KCAU bank accounts:

Bank Code	Account No.	Bank Name
- 002	**010 200 117 1100**	**Standard Chartered Bank - Ruaraka**
- 073	**135 217 8**	**ABSA Bank – Westlands**
- 007	**643 228 001 5**	**NCBA – Wabera Street**

ORIGINAL DEPOSIT SLIP must be attached to the application form when forwarding to the admissions office. You can also pay by MPESA upon verification of documents by the admissions office.

I hereby certify that the information given in this application is correct and complete to the best of my knowledge, and hereby give my permission to the Admissions Office to obtain any verification deemed necessary to process my application. I further certify that attached are true copies of my official transcripts as requested, and that the copies become the property of the university. I include with this application form the official payment receipt /Bank deposit slip for the application fee and copies of other documents as stated in the application requirements.

Signature:.……………….….………………   **Date:.………………….....................**

Thank you for choosing to study with us!

Student Disclosure of Disability

The University has a responsibility to provide all students with equal rights to participate in education and to be treated with dignity in a supportive learning environment. The University assists students with disabilities and/or significant health conditions to complete all University learning activities within the context that the interests of all parties affected are balanced and risks minimised. All of the University's programs and courses are available to people living with disability and/or significant health conditions, unless a reasonable accommodation cannot be made that maintains the academic, clinical and professional requirements of the Program/Course detailed in the Program Learning Outcomes (PLOs) or will cause unjustifiable hardship to the University.

KCA University asks students to disclose relevant information about circumstances that may impact on their capacity to undertake their studies and for the purpose of making reasonable adjustments. **Students have the option to complete this non-compulsory Disclosure Statement.**

Section A
Do you have a disability, health condition, or illness; or are you the primary carer of a person with a disability, health condition, or illness, that is likely to impact upon your (his/her) capacity to fulfil the requirements of a learning activity in a University program?

Please tick the box which you feel relates to you
- ❏ You have a social/communication impairment such as Asperger's syndrome
- ❏ You are blind or have a serious visual impairment
- ❏ You are deaf or have a serious hearing impairment
- ❏ You have a long-standing illness or health condition such as cancer, HIV or epilepsy
- ❏ You have a mental health condition, such as depression or anxiety disorder
- ❏ You have a specific learning difficulty such as dyslexia, dyspraxia or AD(H)D
- ❏ You have physical impairment or mobility issues
- ❏ You have two or more impairments and/or disabling medical conditions
- ❏ Autistic Spectrum Condition
- ❏ Other (disability, impairment or medical condition that is not listed above) _____
- ❏ You do not have a disability

If you have declared a disability:

Have you enclosed a letter from your General Practitioner (GP) or Specialist? Yes ☐ No ☐

If No, when will you be able to send this to us? _____

Have you enclosed the report from the Educational Psychologist? Yes ☐ No ☐

If No, when will you be able to send this to us? _____

Please enclose a copy of a current medical letter or a report from an educational psychologist and return this form to: **Admissions Office, Block C Welcome Centre. If you wish to withdraw your consent at any point please contact us at registrar@kcau.ac.ke or visit the Admissions Office for assistance.**

Section B
I have read and understood the information on this form relating to disclosure of information about my disability and consent to my information, as described above, to be used and shared for the purpose of making reasonable adjustments to offer supportive learning environment. (If you do not consent to this, please speak to an Advisor and do not sign below).

Student Signature: ………………………….………… **Date:** ……………………..

KCAU Professional and Technical Training Institute courses:

KASNEB Courses

Vocational Certificates Qualifications
- Back-end Web Development with Python
- Data Analytics with Python
- International English Language Testing System
- Python Programming Basics

Certificate Qualifications
- Certificate in Accounting and Management Skills (CAMS)

Diploma Qualifications
- Accounting Technicians Diploma (ATD)
- Diploma in Computer Networks and Systems Administration (DCNSA)
- Diploma in Data Management and Analytics (DMA)
- Diploma in Information Communication Technology (DICT)

Professional Qualifications
- Certified Public Accountants (CPA)
- Certified Secretaries (CS)
- Certified Investment and Financial Analysts (CIFA)
- Certified Information Systems Solutions Expert (CISSE)
- Certificate in Information Communication Technology (CICT)

Post - Professional Qualifications
- Certified Forensic Fraud Examiner (CFFE)

KISEB Courses
- Certified Procurement & Supply Chain Professional of Kenya (CPSP-K)

ACCA Courses
- ACCA - Qualification
- ACCA – Foundations in Accountancy

Other Professional Courses
- Advancing Business Education (ABE)
- Certified Information Systems Auditor (CISA)

Short Professional Courses
- International Computer Driving License (ICDL)
- CISCO /CCNA
- Certificate in Computer Applications
- Linux
- Web Development
- Accounting Packages
- Certificate in Computer Programming
- Statistical Package for Social Scientists (SPSS)
- Computerised Accountant
- Microsoft Navision ERP
- Cookery, Bakery, Pastry & Cake Decoration Course

KNEC Courses
- Artisan Certificate in Salesmanship
- Artisan Certificate in Food & Beverages
- Craft & Diploma in Business Management
- Craft & Diploma in Food and Beverages
- Craft & Diploma in Supply Chain Management
- Craft & Diploma in Information Communication Technology (ICT)