Affix one current passport size photo here (Not photo me)

CUK/ASR/FORM 01

CO-OPERATIVE UNIVERSITY OF KENYA

Website: www.cuk.ac.ke Email: admissions@cuk.ac.ke; Tel: 0724311606

OFFICE OF THE REGISTRAR (ACDRI)
APPLICATION FOR ADMISSION INTO BACHELOR/ DIPLOMA/CERTIFICATE PROGRAMMES (SELF-SPONSORED)

Applicant's Personal Details

1. Applicant's Name (in full): .....
   (Surname) (First Name) (Other Names)
   Mobile Phone Number: ..... E-mail: .....
   Contact Address: .....
   Date of Birth: ..... Gender: .....Marital Status: ..... Religion: .....
   Nationality: ..... National ID/Passport/Birth Certificate No.: .....
2. Name of Next of Kin: ..... Relationship: .....
   Telephone Number: ..... E-mail: .....
   Contact Address: .....
3. Do you have any form of disability? YES/NO: .....
   If yes, indicate the nature of disability: .....
   If registered with NCPWD, indicate NCPWD Registration Number: .....

Programme Application Details

1. Name of Programme applied for: .....
   .....
2. Programme Level Bachelors ☐ Diploma ☐ Certificate ☐
3. Mode of study (Tick appropriate): Full time ☐ Par-Time ☐ eLearning ☐
4. Preferred Campus: Main Campus ☐ Nairobi CBD Campus/Centre ☐
5. Preferred Date of Commencement: January ☐ May ☐ September ☐

Institutions Attended and Qualifications Obtained

Institutions Attended	Qualifications	Year of Completion	Grade Obtained
a) Academic			
b) Professional			

NB. *Attach copies of certificates and academic transcripts*

THE CO-OPERATIVE UNIVERSITY OF KENYA
REGISTRAR
ACDRI
P.O. Box 24814-00502 KAREN, KENYA

Applicant's Work/Research Experience (Where applicable)

Occupation	Organization	Date

Have you previously studied at The Co-operative University of Kenya? Yes ☐ No ☐

Programme: .....

Reg. No: ..... Year of Graduation: .....

How did you learn about The Co-operative University of Kenya (CUK)?

Newspaper	☐	CUK Student	☐	Twitter	☐	CUK Website	☐
TV	☐	CUK Staff	☐	Facebook	☐	Exhibition	☐
Radio	☐	School Teacher	☐	Instagram	☐	College/High School Fair	☐
Others (Specify):							

If you were referred by a staff member or a current/former student, please provide their name and contact details:

Name: ..... Contact: .....

Applicant's Declaration

I hereby declare that, to the best of my knowledge, the information I have provided is correct.

Name: ..... Signature: ..... ID No. .....

For Official Use only

Application fee paid Kes.: .....

Official Receipt No:..... Date and Official Stamp: .....

Remarks, if any: .....

Application: Approved ( ) Rejected ( ) Deferred ( )

Intake: January ( ); May ( ); September ( )

THE CO-OPERATIVE UNIVERSITY OF KENYA
REGISTRAR
ACDRI
P.O. Box 24814-00502 KAREN, KENYA

INSTRUCTIONS:

1. Completed application forms should be submitted to:
   The Admissions Office
   The Co-operative University of Kenya,
   P O Box 24814 – 00502
   Email: admissions@cuk.ac.ke
   KAREN – NAIROBI, KENYA

2. Attach the following documents:

   a) Copies of all certificates and result slips from previous academic levels.
   b) A copy of your National Identity Card or Birth Certificate.
   c) One (1) passport-sized photograph.
   d) The original copy of the fee deposit slip for the non-refundable application fee— Kshs. 1,500 for a Bachelor's program and Kshs. 500 for Diploma/Certificate programs. (*Payment must be made via bank deposit at any* ***Co-operative Bank of Kenya, Account No. 01129062663600*** *(Karen Branch, Nairobi), using* ***Admission No. APP001***).

3. Completed application forms should be scanned and emailed to **admissions@cuk.ac.ke**

CUK is ISO 9001: 2015 Certified
THE CO-OPERATIVE UNIVERSITY OF KENYA
REGISTRAR
ACDRI
P.O. Box 24814-00502 KAREN, KENYA