



THE CO-OPERATIVE UNIVERSITY OF KENYA

STUDENTS PERSONAL DETAILS

Information in this form is intended to help the office of the Registrar (AA) understand the student better. It will be used for purposes of improving the students' welfare while at The University. (To be completed in THREE copies and in capital letters) *One copy to be retained by the candidate.*

1. a) Full Name
 (Mr/Mrs/Miss) Surname First Name Other

b) Male Female

2. National Registration Number (ID)

3. University Registration Number

Year of Study 1. First 2. Second 3. Third

4. Date of Birth Date Month Year

5. Religion 1. Protestant 2. Catholic 3. Muslim

4. Other

Do you require a Government Loan? Yes No

6. Nationality 1. Kenyan 2. Non Kenyan

7. Mobile Number

E-mail: _____

8. Home Contact Address (Where you can be contacted during Vacations)

P O Box Town Code

Location _____ Name of Chief _____

Division _____ District _____ County _____

15. Place of Permanent Residence: Village _____ Name of Assistant Chief _____

Nearest town _____ Location _____ Name of Chief _____

Division _____ District _____ County _____

16. Give names and addresses of two person who can be contacted in case of emergency.

(i) Name
 Surname First Name Initials

Relationship P O Box (Address) Code Town

Telephone (Landline) Mobile E-Mail

Address

(ii) Name
 Surname First Name Initial

Relationship P O Box (Address) code Town

Telephone (Land line) Mobile E-Mail (Address)

17. Name and address of Secondary School attended

a) Name

b) Address
 P O Box Town

Dates From To

18. KCE/KCSE or equivalent Results (Subjects & Grades)



Mean Score/Division (where applicable)

19. Name and address of school attended for KACE (where applicable)

a) Name

b) Address

P O Box

Town

Dates: From To

20. KACE Results (Subject and Grades)

21. Any other Institutions attended and qualifications attained

a) Name of institution (You may use abbreviation)

b) Qualifications 1. Diploma 2. Certificate

c) 3. Specify field _____

22. Games/Sports: Which games and Sports do you participate in?

01. Soccer 02. Hockey 03. Basketball 04. Netball

05. Tennis 06. Badminton 07. Rugby 08. Volleyball



- 09. Athletics
- 10. Swimming
- 11. Table Tennis
- 12. Darts
- 13. Karate
- 14. Martial Arts
- 15. Others

If you represented your school, etc; in games please give details:

23. Clubs and societies: Which clubs and societies are you interested in? Please give details of your participation .

a) First choice

b) Second choice

c) Third choice

24. Do you suffer from any physical impairment? If so give details

- 1. No.
- 2. Yes

I certify that the information I have provided is correct

Signature _____ Date _____

**Approval by: D.B.OTIENDE- Registrar AA
22 July 2017.**



