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THE CO-OPERATIVE UNIVERSITY OF KENYA

STUDENT'S PERSONAL DETAILS FORM

Information provided in this form is intended to help the Office of the Registrar (Academic Affairs), understand the student better. It will be used for purposes of improving the student's welfare while at the University.

Instruction: To be completed in capital letters

1. Name:
(Surname) (First name) (Others)
2. Gender: Female Male
3. Identification(I/D)/passport/birth certificate number
4. K.C.S.E. Index No: (where applicable)
5. Registration number
6. Date of birth
7. Religion Nationality
8. Contact address
- Cell phone No. Email address
9. a) Marital status
- b) Name and address of spouse (if married)
10. Full name of father/guardian
- Telephone Address
11. Full name of mother/guardian
- Telephone Address
12. a) Occupation of father/guardian
- b) Occupation of mother
13. Full name of sponsor (where applicable)
- Telephone Address
14. Place of birth (Village/Estate)
- Sub-location/Street Location
- Name of Assistant Chief: Name of Chief:
- Sub-County County
15. Name of your current residence (Village/Estate)



CUK is ISO 9001: 2015 Certified

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

NAME	RELATIONSHIP	ADDRESS & TEL. NO.
.....
.....

17. Name and address of secondary school attended

Date: From To

18. Who paid your secondary school fees?

19. State the number of your siblings attending the following categories of institutions.

i) Primary school..... ii) Secondary school iii) College/University

20. Other institutions attended and qualifications attained

21. Have you represented your school in any of the following;

Music Drama Creative arts

At what level? School County National

22. Games/Sports: Which games/sports do you participate or are interested in?

23. Have you represented your school in sports and games?

At what level? School County National Others

24. Clubs, Societies and Hobbies: Which clubs, societies and hobbies are you interested in?
Please provide details of your participation.

25. Do you have any form of impairment? If yes, give details.

26. Please give any information you think is useful for the University to know in order to facilitate your comfortable stay in campus.

I certify that the information I have provided is correct.

Signature

Date



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