## MINISTRY OF EDUCATION

STATE DEPARTMENT FOR TECHNICAL, VOCATIONAL EDUCATION AND TRAINING

# BUTULA TECHNICAL AND VOCATIONAL COLLEGE

P.O. BOX 44 - 50404, BUMALA (KENYA) Email address: butulatechnical@gmail.com

## APPLICATION FORM

# REF: BTLTVC/REG/APP/F1

## (FILL IN BLOCK LETTERS)

	(,,	LE III DECOR LETTE	113)		
Name of the cour	se applie	ed for		Level(Diplo	
ma/Craft/Artisan				Level(Diplo	
Applicant's Name	,				
ID NoE	mail:				
Mobile No					
<ol><li>Date of birth:</li></ol>					
		Day Month Y	ear		
<ol><li>Gender: Male</li></ol>		Female			
<ol><li>Parent's / Guardia</li></ol>					
<ol><li>Postal Address</li></ol>				••••	
7. County		-			
		b-location			
9. Declaration of Ed					
School Code/Index Number	Year	Level/Certificate	School/Institution	Grade/Score	
I hereby declare that all the					
information declared on this application form are true and complete to the best of my					
knowledge and belief. I understand that action can be taken against me by the institu					
tion.					
tion.					
Data Signature of Applicant					
Date Signature of Applicant					
OFFICIAL LISE ONLY					
OFFICIAL USE ONLY					
Received On Signature					
Data Clerk / Customer Care					
Status of Application Approved Unapproved					
Remarks (if Unapproved)					
Date processed :		Cia	naturo:		
—		31gi	iature		
				Registrar	
-				-	

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Email address: butulatechnical@gmail.com

REF: BTLTVC/REG/ADM/F2

# OFFER OF ADMISSION AND JOINING INSTRUCTIONS

Dear	Fix a coloured passport
RE: OFFER OF ADMISSION:	passport
Following your application for admission, Butula Technical and Vocational C d to inform you that you have been offered an opportunity to pursue level urse in	
The course will take a duration ofyear (s).	
You are required to report to the college for registration on	ut not later tha

You are supposed to bring the following items on reporting:

- Original and photocopy of Admission Letter
- Two coloured passport size photographs

n ...... And later embark on your studies.

- Your National ID card and a photocopy of each side.
- Originals and photocopies of K.C.P.E, K.C.S.E Result slips or certificates and school le aving certificates for verification.
- Original and photocopy of your birth certificate.
- 1 ream A4 printing papers
- 2 spring files
- Filled medical form
- A Scientific Calculator engineering courses.
- Personal effects (Stationery, Mattress, Bed sheets, Bed covers, Soaps, Towel, Shoes, Water buckets, Plates and mosquito net.)

For any enquiries contact the registrar on: 0710880143

MS. CAROLYNE KWEDHO SENIOR PRINCIPAL/SECRETARY BOG

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## MEDICAL FORM

REF: BTLTVC/REG/MED/F3

Name: Sub-county: Sub-county:	•••••
Eye and Vision	
Unaided Right - Left?	
Aided right?	
Left	
Colour blind?	
Visual Field?	
Nose and Throat	
Nasal breating	
Habitual?	
Adenoids?	
Ears: Hearing voice - Right	
Left	
Mouth and teeth	
Glands in the neck	
Chest Heart	
With special reference to any TB tendencies	
Spiral column	
(a) Urine	
(b) Faeces	
Spleen	
Liver	
Piles and varicose veins	
Any other weakness, defect or disease e.g defects on sp	
eech, local etching or spasm, chore or other neurons dis	
order.	
STIs	
Rheumatic tendency	
General observations where care is desirable	
Any others	
Name of M.O.H: Da	ate:
The state of the s	
HOSPITAL RUBBER STAMP	
Declaration by Applicant:	The short of any large states
I declare that the information provided in this form is TRUE	, ,
Trainee's Name: ID No.: Sign: Parent's Name: ID NoSign:	
Parent's Name:Sign:	Date:

NOTE: All applicants m	ust present the form dully filled	d by a medical doctor	on admission.
PARENT/GUARDIAN DI	ECLARATION: In case of any se	erious medical condition	on, I recommend my c
hild be admitted to		hospital.	

NOTE: The parent/ Guardian will foot all expenses incurred during admission in hospital.

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# BUTULA TECHNICAL AND VOCATIONAL COLLEGE

P.O. BOX 44 - 50404, BUMALA (KENYA)
Email address: butulatechnical@gmail.com

### COLLEGE RULES AND REGULATIONS

REF:BTVC/REG/COLL.RULES/F4

## THE FOLLOWING RULES AND REGULATUIONS APLY TO ALL TRAINEES IN THIS CO-LLEGE

Breach of any of these rules and regulations shall lead to disciplinary action.

- PUNCTUALITY: Observe the daily college programs strictly.
- CLASS ATTENDANCE: Trainees must attend all lessons and do all assignments.
- ACADEMIC PERFORMANCE: Trainees not measuring up to the required standard as stipulated in the academic policy may be discontinued.
- 4. MODE OF DRESSING: Trainees must observe personal hygiene and dress decently.
- CLEANLINESS: Trainees will attend to cleanliness requirements in the following areas:- te chnical drawing rooms; dormitories; dining hall and class rooms.
- 6. DRUG ABUSE: Smoking, taking of any addictive drugs and alcoholic drinks is prohibited.
- CARE OF PROPETY: Everyone is expected to respect Institutional/personal property. Any damage or loss or abuse of such property shall be accounted for by the individual concer ned.
- 8. RESTRICED AREAS: The following are out of bound:
- (a) Staffroom to trainees
- (b) Kitchen to trainees and visitors
- VISITORS: All visitors should report to the office. Unless with express permission from the
  office, no visitor will be allowed to see a student during class time. Visitors may see train
  ees during break and lunch.
- SUSPENSION: Once a student has been suspended, he/she will be escorted by the securit
  v officer out of the college compound.
- OUTINGS: Absence from college shall be with express permission from the Dean.
- SICKNESS: All cases of sickness must be reported to the officer in charge or the duty ma ster.
- RESPECT: All trainees are expected to display responsible behavior, problems, if any shall be solved through established channels. All are expected to display a higher degree of res pect to staff, visitors, themselves and their colleagues.
   RESPECT IS NOT DEMANDED, IT IS COMMANDED.

### DECLARATION

l (full name)he above rules and regulations a		,	ave read
Trainee's Signature:	Mobile No.:	. Date:	
WITNESS			
Parent/Guardian's Name:	ID No.:		

MODIIE 140 Date	Mobile No.:	Signature:	Date:	
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## MINISTRY OF EDUCATION STATE DEPARTMENT FOR TECHNICAL, VOCATIONAL EDUCATION AND TRAINING BUTULA TECHNICAL AND VOCATIONAL COLLEGE

P.O. BOX 44 - 50404, BUM ALA (KENYA) Email address:butulatechnical@gmail.com

TRAINEE'S DETAILS FORM	REF: BTVC/REG/TRAINEE DET./F5
NAME:COURSE:	LEVEL:
Admission No	
ld No	
KRA Pin No.	
First Name	
Middle Name	
Surname	
Gender	
Date Of Birth	
Birth Certificate No	
KNEC K.C.P.E Index No	
KNEC K.C.S.E Index No	
P.O. Box	
Zip Code	
Working Email A dress	
Mobile No.	
Town	
County Code	
Constituency Code	
Ward Code	
Location	
Sub-Location	
Village	
Students Application (New/Continuing)	
Date Of Admission	
Guardian's First Name	

Guardian's Middle Name	
Guardian's Surname Name	
Guardian's Email	
Guardian's Mobile No	

# MINISTRY OF EDUCATION STATE DEPARTMENT FOR TECHNICAL, VOCATIONAL EDUCATION AND TRAINING BUTULA TECHNICAL AND VOCATIONAL COLLEGE

# F6

P.O. BOX 44 – 50404, BUMALA (KENYA) Email address: butulatechnical@gmail.com
REF:BTVC/REG/TRAINEE DET./
a) STUDENT'S PARTICULARS
Maritual Status: Age:Nationality:
ID/Passport Place of issue:Date of issue:Date
Gender: Male Female
b) GURDIAN'S/PARENT'S PARTICULARS
Fathers Name (Alive/Deceased)
Mothers Name (Alive/Deceased)
Address of Parent/Guardian:
Number of Siblings Brothers:Sisters:Sisters
c) HOME/CONTACT ADRESS
County : Home District
Division Location
Sublocation Village Estate
Name of Chief Mobile No
Name of Sub chief Mobile No
d) PREVIOUS EDUCATION
Name and address of Primary School
Name of Head teacher
Mobile No Year done (KCPE)
Name and address of last Secondary School

Name of Principal
Mobile No: Year done (KCSE)
DECLARATION
FEES: I understand that fees for the term are paid full at the beginning of each term. Fees once paid are not refundable.
<b>DICIPLINE:</b> I have read and understood the institute's rules and regulations curr ently in force. I declare that I shall obey them and also agree to be governed by normal discipline procedures.
NAME OF STUDENT: AND NO:
SIGNATURE : DATE:
VERIFIED BY REGISTRAR
NAME:
SIGNATURE:DATE:
OFFICIAL STAMP:

e)

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# OTHER REQUIREMENTS

### **HEALTH REQUIREMENTS**

Complete the medical form attached.

Present yourself to a registered medical practitioner who will complete the form. Avail the dully filled form on admission.

The college reserves the right to require a medical examination of any student at any time during training.

### CODE OF REGULATION

As a condition of admission you will be required to undertake in writing your commitment to rule s and regulations set out in this document and abide by all rules and regulations for students at Butula Technical and vocational college.

## NOTE

Following your placement in this institution, you are eligible for a Government Scholarship, Loan and Bursary to assist with your educational expenses. If you need Government Financial Support, you MUST Make an application for consideration through the website <a href="www.hef.co.ke">www.hef.co.ke</a> in case the Government scholarship, Loan and Bursary do not cover the entire cost of your program, the deficit will be met by your parent/guardian.

All students who join our college from September 2023 intake will be expected to use the new fin ance model as outlined below:

S/N	NEED LEVEL	GOVERNMENT S CHOLARSHIP	GOVERNMENT L OAN	HOUSEHOLD	TOTAL
1.	Band 1	70%	22.5%	7.5%	100%
2.	Band 2	60%	28%	12%	100%
3.	Band 3	50%	32%	18%	100%
4.	Band 4	40%	38%	22%	100%
5	Band 5	30%	43%	27%	100%

HELB beneficiaries will be entitled to upkeep depending on the level of need.

Welcome to the TVET Institution of choice.

MS. CAROLYNE KWEDHO

PRINCIPAL/SECRETARY BOG

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## BTLTVC/REG/FEES/F6 FEES STRUCTURE FY 2023/2024

ITEM	TERM 1	TERM 2	TOTAL
TUITION	20,300.00	16,321.00	36,641.00
PERSONAL EMOLUMENT	7,629.00	5,250.00	12,879.00
EWC	2,170.00	1,779.00	3,949.00
RMI	2000.00	1,257.00	3,257.00
LT&T	2190.00	1,779.00	3969.00
ACTIVITY	2,400.00	2,114.00	4,514.00
MEDICAL & INSURANCE	1,500.00	500.00	2,000.00
TOTALS	38,189.00	29,000	67,189.00

### OTHER LEVIES INCLUDE:

- All new trainees shall pay 250/= for trainees identity cards.
- All new trainees shall pay 1000/= for caution money
- KUCCPS placement Fee 1500/=
- TVETA Quality Assurance Fee 500/=
- Trainees shall arrange for their own accommodation and meals.
- All fees is paid to EQUITY BANK, BUSIA BRANCH ACCOUNT NO.0780284400
   351 ACCOUNT NAME: BUTULA TVC RECURRENT/TUITION ACCOUNT.



Yours faithfully,

MS. CAROLYNE KWEDHO SNR PRINCIPAL/SECRETARY BOG