

Office of the Operation Manager& Enrolment Services (OMES), Westlands Campus Kipro Center 3rd Floor, P.O Box 939-00600, Sarit Center Nairobi http://www.emobilis.org

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NOTE: SEE OVER LEAF FOR RULES AND REGULATIONS

Please complete this form and return it to us with the following documents attached

- 1. Two Coloured passport size picture
- 2. Photocopy of your National ID.
- 3. Photocopy of your Highest Level Education Certificates.
- 4. Registration Fee of Ksh 1,500

APPLICANT DETAILS

S E CTI ON 1: P LE ASE FILL IN YOUR DETAILS IN BLOCK FORM

| LAST NAME: | FIRST NAME : | | MIDDLE NAME: |
|---|-------------------------|----------------|-----------------|
| CITY/TOWN OF RESIDENCE: | <u> </u> | NATIONALITY: | ID NO/INDEX NO: |
| | - | | <u> </u> |
| POSTAL ADDRESS: | F | POSTAL CODE: | |
| E-mail ADDRESS: | | CELL PHONE NO: | 3' |
| | | | |
| DATE OF BIRTH: / | 1 | GENDER: FEMALE | MALE |
| | | 3 | |
| DO YOU HAVE ANY DISABILITY | YES NO | IF YES SI | PECIFY |
| SECTION 2: | | | |
| PROGRAM YOU ARE APPLYING FOR _ | | | |
| | 112 | | |
| TIMING OF SELECTED PROGRAM (Daytime, Evening, Saturday): | | | |
| LIST ALL COLLEGES, UNIVERSITIES AND OTHER POST SECONDARY INSTITUTIONS ATTENDED: | | | |
| 1. 2. | | 3. | |
| CURRENT UNIVERSITY/COLLEGE ENROLLED IF ANY: | | | |
| VEAD OF STUDY IF IN COLLEGE/LINIV | EDSITY/COLIDSE DI IDSHE | ·D· | |

PARENT/GURDIAN & NEXT OF KIN DETAILS FIRST NAME MIDDLE NAME PARENT LAST NAME PHONE NO PHYSICAL ADDRES NEXT OF KIN FULL NAME RELATIONSHIP (E.G Brother) NEXT OF KIN CONTACTS Failure to provide full and accurate information may result in the cancellation of this and future registrations. **DECLARATION:** I _____ accept and submit myself to statues, rules, regulations and ordinances of the eMobilis Mobile Technology Academy as authorized by the Board of Directors, Administration and the Program Coordinator in which, in due course I shall be registered and to any amendments thereto which may be made while I am a student of the academy and I promise to observe the same. I consent and authorize the disclosure of any information by the academy for the purpose of verifying information provided as part of this process and I understand that an admission of registration granted on the basis of this application may be revoked if the answers given are untrue in any material respect. SIGNATURE _____ **DATE** /____/ **OFFICIAL USE ONLY** APPROVED < PENDING \subseteq DENIED \subseteq **COMMMENTS: SIGNATURE** DATE /

SOME PROGRAM, DECISIONS WILL NOT BE MADE UNTIL ALL OFFICIAL TRANSCRIPTS ARE RECEIVED FAILURE TO DISCLOSE ATTENDANCE AT COLLEGE, UNIVERSITY OR OTHER POST-SECONDARY INSTITUTIONS

ATTENDANCE WILL RESULT TO YOUR IN-ELIGIBILITY FOR ADMISSION.

RULES AND REGULATIONS:

- ! Please note that you will not be eligible for admission until the appropriate fees are paid.
- ! Fees payments must be made through Commercial Bank of Africa Ltd in favor of eMobilis limited Bank a/c no 6656220011
- ! Lateness is not allowed Students must attend all lessons
- ! Student must finish lab assignments given and submit to the instructor within the stipulated time frame.
- ! Disconnection of computers and other accessories is not allowed
- ! Students must submit the banking slip to obtain a receipt from the account and administration department.
- ! Fees are neither refundable nor transferable
- Agreed fees must be paid in one full installment first upon the admission
- ! No food stuffs or drinks are allowed in labs or classrooms
- If you cause any damage to the institution property you are liable for replacement
- 1 All institution properties must be returned to the store keeper immediately after class