



**Eldoret Campus**  
**Skymart Building**  
**1<sup>st</sup> Flr Rm F45**

# **EAST AFRICA VISION INSTITUTE**

## **SCHOOL OF MANAGEMENT AND HUMAN CAPACITY BUILDING**

**Eldoret Main Campus**  
**City Plaza Next To**  
**Bandaptai Hotel**

**P.O. Box 6662-30100 Eldoret,**  
**Tel: +254722394443**  
**Email: [info@eavi.ac.ke](mailto:info@eavi.ac.ke)**  
**Website: [www.eastaflicavisioninstitute.ac.ke](http://www.eastaflicavisioninstitute.ac.ke)**

**Our Ref:** EAVI/8833/2026

**date:** 31/01/2026

**Dear Sir/Madam,**

### **RE: ADMISSION LETTER**

Name: Braxton Kipchumba

Congratulations! We are pleased to inform you that, with the approval of the Board of Directors, you **East Africa Vision Institute (EAVI)**. have been admitted as a student of

You have been admitted for the **Diploma / Certificate / Artisan in Health Services Support**

with **Admission Number: WEST-2026-2010**

You are required to report to the Institute on:

1/20/2025

**Note:** You are required to report to the college immediately.

### **Fee Payment Details**

#### **East Africa Vision Institute**

**Equity Bank:** Account No. 0470292838961

**KCB Bank:** Account No. 1115207350

**M-PESA Paybill:** 257557, Account Number: WEST-2026-2010

**Note:** We do not accept cash payments. All fees must be deposited in the above accounts only.

Yours faithfully,

**TRIZAH JUMA**

PRINCIPAL  
EAST AFRICA VISION  
INSTITUTE  
ELDORET BRANCH  
For Directors:

Philemon Saina (B.Sc. Eng, MBA)

Beth Mwangi (B.A, MBA, PhD Finance)

R. B. Patel (B.Sc. Eng, M.Sc.)



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**Our Ref:** EAVI/7952/2019

**Date:** 31/01/2026

**Your Ref:**

**THE CHAIRPERSON  
BURSARY COMMITTEE**

**RE: BURSARY SUPPORT FOR,**

Name: Braxton Kipchumba

The above-named student **Adm. No. WEST-2026-2010**

Enrolled for **Diploma / Certificate / Masters Services Support**

Due to financial difficulties, the student is not able to continue / start the course immediately; therefore we request that you give the student school fees support. The student has a fee balance of KES 0.00. The total fees per year is KES 5700.00.

### **Fee Payment Details**

#### **East Africa Vision Institute**

Equity Bank ACC NO: 0470292838961 or  
KCB A/C NO: 1115207350 or  
MPESA: PAYBILL NO 257557, ACCOUNT NO WEST-2026-2010

I believe you will consider her/his request.

Thank you in advance, yours faithfully,

**For College Principal**

PRINCIPAL  
EAST AFRICA VISION INSTITUTE  
ELDORET BRANCH

**TRIZAH JUMA**



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## REQUIREMENTS

### Documents (All Students):

- Admission Letter: copy
- KCSE Certificate or Results Slip: copy
- National ID or Birth Certificate: copy
- Passport-Sized Photographs: 2-4 recent photos
- Bank Payment Slip: Proof of tuition fee payment
- Accommodation Payment Receipt: If applicable

### Uniforms & Clothing (Medical Students Only):

- KMTC Uniform with EAVI Logo
- Ladies: Dress - 2 pairs
- Boys: Trousers + White Shirt - 2 pairs
- White Lab Coat with EAVI Logo: 2 coats
- Scrubs: 2 pairs

### Footwear (Medical Students Only):

- Crocs: 2 pairs
- Shoes: 2 pairs

### Academic & Stationery (All Students):

- Notebooks: For lectures and practical's
- Writing Instruments: Pens, pencils, erasers, highlighters
- Calculator: Required for certain courses
- Laptop or Tablet: For e-learning, research, and assignments

**Ensure all items are prepared and organized prior to the reporting day to facilitate a smooth registration process.**