

# The Language Center



Underline your field of interest(s)

Attach 2 recent passport  
size photographs here

I. A. **PERSONAL DATA**

DR.

MR.

MRS.

MS.

(SURNAME)

(FIRST)

(MIDDLE)

- B. PRESENT LOCAL ADDRESS: P.O.BOX \_\_\_\_\_ PHONE NUMBERS (1) \_\_\_\_\_  
(2) \_\_\_\_\_
- C. OVERSEAS ADDRESS \_\_\_\_\_ PHONE NUMBERS (1) \_\_\_\_\_  
(2) \_\_\_\_\_

PHYSICAL ADDRESS \_\_\_\_\_

FAX: \_\_\_\_\_ E-MAIL ADDRESS: \_\_\_\_\_

- D. IMMIGRATION STATUS (NON-KENYANS ONLY) \_\_\_\_\_

- E. BIRTH PLACE \_\_\_\_\_ BIRTH DATE \_\_\_\_\_  
PRESENT CITIZENSHIP \_\_\_\_\_ DD/MM/YYYY

- F. HEALTH \_\_\_\_\_ HEIGHT \_\_\_\_\_ WEIGHT \_\_\_\_\_

- G. MARITAL STATUS \_\_\_\_\_ NO. OF CHILDREN \_\_\_\_\_  
AGES \_\_\_\_\_

- H. NAME OF SPOUSE \_\_\_\_\_ ID/PASSPORT NO. \_\_\_\_\_

SPONSORING AGENCY OR EMPLOYER \_\_\_\_\_ PHONE \_\_\_\_\_

- I. PASSPORT/I.D NUMBER. \_\_\_\_\_ PLACE AND DATE OF ISSUE \_\_\_\_\_  
(ALL KENYANS ATTACH COPY OF ID)

NATIONAL SOCIAL SECURITY FUND NUMBER(NSSF NO) \_\_\_\_\_

INCOME TAX PERSONAL IDENTIFICATION NUMBER (PIN NO) \_\_\_\_\_

TEACHERS SERVICE COMMISSION NUMBER (TSC NO) \_\_\_\_\_

NATIONAL HOSPITAL INSURANCE FUND (NHIF) CARD NUMBER \_\_\_\_\_

UNIVERSITY REGISTRATION NUMBER (Local teachers) \_\_\_\_\_

NEXT OF KIN \_\_\_\_\_ TEL NO: \_\_\_\_\_

RELATIONSHIP: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ FAX NO: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

## II. EDUCATION

A. SECONDARY SCHOOL: LOCATION \_\_\_\_\_ YEAR GRADUATED \_\_\_\_\_

B. INSTITUTIONS OF HIGHER LEARNING:

DATE OF ATTENDANCE	COLLEGE/ UNIVERSITY	LOCATION	MAJOR	DEGREE	SEMESTER GRADUATE UNITS

TITLE OF M.A OR Ph D THESIS \_\_\_\_\_

C. CERTIFICATES HELD: (TEACHING, ADMINISTRATIVE, OTHERS)

CERTIFICATE SUBJECT/TYPE	GRADE LEVEL	PLACE AND DATE OF ISSUE	DATE OF EXPIRATION

D. I SPEAK AND READ THE FOLLOWING LANGUAGES \_\_\_\_\_

MY NATIVE LANGUAGE IS: \_\_\_\_\_

### III. PROFESSIONAL EXPERIENCE

#### A. TEACHING AND/OR ADMINISTRATIVE EXPERIENCE

INCLUSIVE DATES MONTH/YEAR	SCHOOL	ADDRESS	SUBJECT/ GRADE LEVEL	IMMEDIATE SUPERVISOR

#### B. SUMMARY OF YEARS EXPERIENCE AS GIVEN ABOVE:

TEACHING: AGES 5 - 11YRS      GROUP CLASSES: \_\_\_\_\_ YRS/MONTHS  
   PRIVATE CLASSES: \_\_\_\_\_ YRS/MONTHS  
         AGES 12 – 18YRS      GROUP CLASSES: \_\_\_\_\_ YRS/MONTHS  
   PRIVATE CLASSES: \_\_\_\_\_ YRS/MONTHS  
         ADULTS                  GROUP CLASSES: \_\_\_\_\_ YRS/MONTHS  
   PRIVATE STUDENTS: \_\_\_\_\_ YRS/MONTHS

OTHERS: \_\_\_\_\_

C:      ASSIGNMENT PREFERENCE: AGES 5-11YRS \_\_\_\_\_ 12-18YRS \_\_\_\_\_ ADULTS \_\_\_\_\_

D:      I AM INTERESTED IN:

1.      SUBSTITUTING \_\_\_\_\_ PRIVATE CLASSES \_\_\_\_\_ REGULAR CLASSES \_\_\_\_\_

MORNING HOURS (8:15 - 12:30) \_\_\_\_\_ AFTERNOON (1:00 - 5:30) \_\_\_\_\_

EVENING HOURS (5:30 - 8:30) \_\_\_\_\_ SAT. MORNING BETWEEN  
(8:30 - 12:30) \_\_\_\_\_

2. MINIMUM HOURS WEEKLY \_\_\_\_\_ MAXIMUM HOURS WEEKLY \_\_\_\_\_
3. I AM WILLING TO WORK UP TO TWO/THREE/FIVE EVENINGS A WEEK SHOULD THE NEED ARISE.
- E. EXPERIENCE OUTSIDE THE FIELD OF EDUCATION \_\_\_\_\_  
\_\_\_\_\_
- F. INTERESTS OUTSIDE FIELD OF EDUCATION: \_\_\_\_\_
- G. MY PHILOSOPHY OF EDUCATION IS \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- I AM/AM NOT AFFILIATED TO A SIMILAR TEACHING INSTITUTION.  
(CROSS OUT ONE).
- H. I HAVE SUBMITTED THE FOLLOWING CREDENTIALS TO THE LANGUAGE CENTER : (CV) \_\_\_\_\_ (RESUME) \_\_\_\_\_ (DIPLOMA) \_\_\_\_\_  
(TRANS. OF GRADES) \_\_\_\_\_  
(RECOMMENDATIONS) \_\_\_\_\_ (REFERENCE) \_\_\_\_\_  
(OTHERS) \_\_\_\_\_
- I. PRESENT/MOST RECENT GROSS SALARY IN KSH.(P.M) \_\_\_\_\_  
(STRIKE OUT ONE)
- J. I LEARNT ABOUT THE LANGUAGE CENTER THROUGH \_\_\_\_\_  
\_\_\_\_\_

I CERTIFY THAT THE ABOVE INFORMATION IS ACCURATE TO THE BEST OF MY KNOWLEDGE AND BELIEF.

DATE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_



+254 721 495 774  
+ 254 202 641 616  
+254 203 870 610/2,  
+ 254 203 869 531/2



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