



# St John's Training College

P.O BOX 346-20600, MARALAL, KENYA, TEL: 0720 215 715 / 0718 590 679  
Email: stjohncollegemaralal@gmail.com

## ADMISSION LETTER :2024- ADM NO. SJC/1593/24

Information on this form is intended to help the director of admission office to keep proper students record. Please read carefully the information before filling. Complete the form in **BLOCK LETTERS** and sign.

### A. PERSONAL DETAILS

Full Names \_\_\_\_\_ ID Number (attach a copy) \_\_\_\_\_  
Gender: M \_\_\_\_\_ F \_\_\_\_\_ Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_  
Home County: \_\_\_\_\_ Sub-county: \_\_\_\_\_

Do you suffer from any health conditions? If yes, describe your condition below.  
\_\_\_\_\_

### B. RELATIONSHIP

#### Parent /Guardian details

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone Number : \_\_\_\_\_

#### Next of Kin details

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone Number : \_\_\_\_\_

#### Sponsor Details

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone Number : \_\_\_\_\_

### C. EDUCATION BACKGROUND

Secondary school attended: \_\_\_\_\_

From year: \_\_\_\_\_ To year: \_\_\_\_\_

Mean Grade attained : \_\_\_\_\_ ( attach copy).

### D. COURSE DETAILS



# St John's Training College

P.O BOX 346-20600, MARALAL, KENYA, TEL: 0720 215 715 / 0718 590 679

Email: stjohncollegemaralal@gmail.com

Name and level of course you wish to take, course: \_\_\_\_\_.

Level: \_\_\_\_\_ Starting date: \_\_\_\_\_ Mode of Study (Day/Evening / Weekend / Distance Learning / Full Time studies/School based).

Course Exam Body: \_\_\_\_\_.

## TERM AND CONDITIONS OF ADMISSION.

1. Course fees must be paid in accordance with the fee schedule.
2. Fees once paid are **NOT REFUNDABLE OR TRANSFERABLE.**
3. **STUDENTS WILL BE** charged for any damages caused to equipments and materials by their negligence.
4. Certificates will be awarded after fulfillment of all course requirements.
5. Registration fee of **Kshs.1 000** is a must before admission letter.
6. **ST. JOHN'S TRAINING COLLEGE** does not accept any liability for loss or damage to any property brought or left in the premises by students
7. **Bring two ream of printing paper**
8. **Six exercise book 6 size A4 120 PAGES**

## DECLARATION (MANDATORY)

I \_\_\_\_\_, declare that the information given in this application form is true and correct to the best of my knowledge. I further certify that I have read, understood and agreed to comply with terms and condition of stipulated herein.

Sign: \_\_\_\_\_ Date: \_\_\_\_\_.

## FOR OFFICIAL USE ONLY.

Date of Admission: \_\_\_\_\_ Admission Number: \_\_\_\_\_ Class Code: \_\_\_\_\_.

**Director of Admission:**

Name: \_\_\_\_\_ Sign: \_\_\_\_\_ Date: \_\_\_\_\_.