

# St. Kizito VTI - Vocational Training Institute

PO Box 759 - 00618 RUARAKA - NAIROBI – KENYA PIN No. PO51097616A (ARCH-DIOCESE OF NAIROBI) - Registration No. MOEST/PC/886/04 Headquarters: Githurai-Kimbo, Tel. 020-2518188 , Tel & Fax. 020-2103935 Branch: Roysambu (Kasarani Roundabout), Tel & Fax. 020-2196799 E -mail: <u>stk.githurai@gmail.com</u>, Web

Mobile: 0724-238716 Mobile: 0724-253547 *Website: <u>www.stkizito.com</u>* 

## PRE-SELECTION APPLICATION FORM for "CABINET MAKER" COURSE

All information given will be treated in the strictest confidence -- Please complete the form using a Blue pen

#### STUDENT'S INFORMATION

STUDENT'S SURNAME: FI	RST NAME:	OTHER:	
MALE: [] FEMALE: [] NATIONAL ID NO:	PIN NO:		
DATE OF BIRTH:/ PLACE OF	- BIRTH:		
MOBILE NO: WHAT	SAPP NO:		
EMAIL ADDRESS:			
TOWN OF RESIDENCE:	COUNTY:		
POSTAL ADDRESS: CODE:			
Are you looking for <b>accommodation</b> near St. Kizito Githurai? ( <i>tick</i> ): □YES □NO			
How did you get to know about St. Kizito Vocational Training Institute?			
By <i>(tick)</i> : □radio, □newspaper, □church, □announcement, □friends □ others <i>(specify)</i>			
Attached DOCUMENTS (Tick):			
<ul> <li>□ PHOTO PASSPORT SIZE</li> <li>□ CERTIFICATE OF SECONDARY EDUCATION (I</li> </ul>	<cse)< td=""><td></td></cse)<>		

□ ID PHOTOCOPY

□ SCHOOL LEAVING CERTIFICATE

OTHERS (Specify) \_\_\_\_\_

#### PARENTS' OR GUARDIAN'S INFORMATION

Marital Status:  $\Box$  Married  $\Box$  Divorced/Separated  $\Box$  Never Married  $\Box$  Widowed (If Widowed attach death certificate).

No. of dependents\_\_\_\_\_\_. Net worth of all assets and investments Ksh\_\_\_\_\_\_

Father		Mother		
Name:		Name:		
I.D No.:	PIN No.:	I.D No.:	PIN No.:	

Father's age: Residence:	Mother's age: Residence:
Type of house: Stone Tin Mud	Type of house: □Stone □Tin □Mud
Occupation:	Occupation:
Salary/month:	Salary/month:
Rent Paid/month:	Rent Paid/month:
Other Expenses/month	Other Expenses/month
Education Level:	Education Level:
Name of employer:	Name of employer:
Address of employer:	Address of employer:
If retired give name and address of last employer:	If retired give name and address of last employer:
Year of retirement:	Year of retirement:

#### **GUARDIAN'S INFORMATION**

Name:	Name:	
I.D No.: PIN No.:	POSTAL ADDRESS	
OCCUPATION:	EMPLOYER NAME AND ADDRESS:	
Type of house: □Stone □Tin □Mud		
Salary/month:	Rent Paid/month:	
Other Expenses/month:	If retired give name and address of last employer:	

## Recommendation (1)

Chief/Sub Chief: This is to certify that ST. KIZITO VTI's a	applicant	is a member
of	_ location/sublocation which is in	County.
He/She is a responsible, bright and fina	ancially needy student. Kindly assist him/her in any way possible	э.
Name of the Officer:	Date:	
Official Stamp:		

### Recommendation (2)

Priest/Pastor/Kadhi:		
This is to certify that ST. KIZITO VITS application	ant	is a member
of chur	rch/Mosque.	
Name of the Priest/Pastor/Kadhi:	Date:	
Character Please comment on the student's character a	and talents:	
	certify that all the information provided abov	
Official Stamp:	Date:	
DECLARATIONS by STUDENT and PARE	NT/GUARDIAN	
	provided in this application form are correct and formation provided in this application form are for alified and support discontinued.	
Student signature:	Date:	
Parent/guardian signature:	Date:	