



SIAYA INSTITUTE OF TECHNOLOGY

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TRAINEE DATA CAPTURE FORM

(Complete part A & B only)

SECTION A: GENERAL INFORMATION OF THE NEW STUDENT

1. NAME _____ ADMISSION NO. _____ SEX: _____

2. PERMANENT ADDRESS: _____ TEL. NO. _____ ID NO. _____

3. DATE OF BIRTH _____ BIRTH CERT. ENTRY NO. _____ (Attach a Copy)

MARITAL STATUS (*SINGLE/MARRIED*) _____

4. FATHER'S NAME: _____ OCCUPATION _____ TEL NO. _____

MOTHER'S NAME _____ OCCUPATION _____ TEL NO. _____

GUARDIAN'S NAME _____ OCCUPATION _____ TEL NO. _____

5. SPONSOR'S NAME _____ TEL NO _____

ADDRESS _____

6. COUNTY: _____ SUB-COUNTY: _____ LOCATION _____ SUB-LOCATION _____

7. ARE YOU PARTIALLY/TOTALLY ORPHANED/NEITHER OF THE TWO? (*PLEASE TICK ONE*)

8. SIBLINGS IN LEARNING INSTITUTIONS

NAME	SCHOOLS/INSTITUTION	LEVEL
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

9. HAVE YOU BEEN BENEFICIARY OF ANY BURSARY SCHEME? YES/NO IF YES WHICH ORGANIZATION _____

10. DO YOU SUFFER FROM ANY CHRONIC DISEASE/DISABILITY? _____ IF YES, EXPLAIN _____

11. ARE YOU ALLERGIC TO ANY FOOD? _____ IF YES EXPLAIN (*AND ATTACH MEDICAL PROOF*) _____

12. LIST DOWN YOUR CO-CURRICULAR ACTIVITIES. A) _____ B) _____

13. STATE WHETHER BOARDER OR DAY SCHOLAR _____

SECTION B: ACADEMIC DETAILS OF THE STUDENT

1. COURSE APPLIED FOR _____ SECONDARY SCHOOL _____

2. PREVIOUS INSTITUTION _____ CRAFT/KCSE YEAR _____

KCSE/CRAFT SUBJECTS	GRADE	KCSE/CRAFT SUBJECTS	GRADE
I) _____	_____	VI) _____	_____
II) _____	_____	VII) _____	_____
III) _____	_____	VIII) _____	_____
IV) _____	_____	IX) _____	_____
V) _____	_____	X) _____	_____

3. AGGREGATE/MEAN GRADE _____ INDEX NO. _____

4. KCPE YEAR _____ INDEX NO. _____

SIGNATURE _____ DATE _____

SECTION C: FOR OFFICIAL USE ONLY

COURSE _____

DEPARTMENT _____

ADMISSION NUMBER _____

CLASS _____

COMMENT _____

I CERTIFY THAT I HAVE RECEIVED THE UNDER MENTIONED DOCUMENTS FROM THE STUDENT

1. PHOTOCOPIES OF:

- a) ACADEMIC CERTIFICATE/RESULTS SLIP
- b) LEAVING CERTIFICATE
- c) IDENTIFICATION CARD
- d) BIRTH CERTIFICATE

2. RECENT MEDICAL CERTIFICATE

3. THREE PASSPORT SIZE PHOTOGRAPHS

4. A REAM OF PHOTOCOPYING PAPER

ANY OTHER _____

SIGNATURE: _____ DATE: _____

REGISTRAR

Data has been entered into the ERP system? (Y / N)

SIGNATURE: _____ DATE: _____

