INSTITUTE OF ENERGY STUDIES AND RESEARCH

OFFICE OF THE DEPUTY DIRECTOR

APPLICATION FOR ADMISSION

NOTES:

1. This form should be **typed** or completed in **BLOCK LETTERS,** and returned to**:**

Deputy Director, Institute of Energy Studies and Research P.O. BOX 10355-00100, NAIROBI KENYA. TEL: 0725559900/020-2666348/6. E-mail iesrcourses[@kplc.co.ke](mailto:info@kplc.co.k%20e)

1. **Attach copies of** (a) Your professional and academic certificates and transcripts, (b) original receipt of payment for your application form (c) copy of your National Identity Card
2. Applicants from East Africa to pay a sum of Ksh.1,000/= as application fee while those from outside East Africa pay Kshs.3,000/= as application fee through the following Bank Account:

**BANK NAME: EQUITY BANK**

**ACCOUNT NAME: KPLC – INSTITUTE OF ENERGY STUDIES AND RESEARCH**

**BANK BRANCH:  WESTLANDS CORPORATE**

**ACCOUNT NUMBER: 0550297446068**

**SWIFT CODE: EQBLKENAXXX**

1. Attach **Two** one inch by one inch (1”x1”) passport photographs

**SECTION A: PERSONAL DATA**

1. A**pplicant’s Name(s)**

Middle

First

Surname

1. **Bio data**

|  |  |  |
| --- | --- | --- |
| Date/Month/Year  Date of Birth / / | Male Female | Religion: |
| Place of Birth: | Citizenship: | Marital Status  Single Married |
| National ID/Passport No: | Mobile Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Office Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Residential District:  Home Location: |
| Email: |
| Address:  P.O. Box \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Code:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Town:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Next of kin details (*In emergencies)*  Names: | Mobile Number: | Relationship: |

1. Physical or visual challenges: Do you have any form of disability? Yes No

If yes please indicate the form of disability ……………………………………………………………………………….............................

**SECTION B: PROGRAMS APPLIED FOR**

1. **(a) Name of the course applied for**

(b) Level

 Diploma  Craft (Certificate)  Artisan  Short Course

(c) Mode of Study

 Day (Full time)  Evening  Open Learning /Distance Learning (ODL)

(d) How did you learn about IESR

 Newspaper  KUCCPS  KPLC/IESR Website  Radio

 Friend/Relative  Tradeshow/Exhibition

**SECTION C: ACADEMIC BACKGROUND**

1. Institutions attended and qualifications obtained

|  |  |  |  |
| --- | --- | --- | --- |
| **QUALIFICATIONS** | **SCHOOL/COLLEGE/UNIVERISITY ATTENDED** | **YEAR OF COMPLETION** | **GRADES OBTAINED/ QUALIFICATION** |
| (i)Academic- |  |  |  |
|  |  |  |  |
|  |  |  |  |
| (ii) Professional Courses |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

1. Work/Research experience (Where applicable)

|  |  |  |  |
| --- | --- | --- | --- |
| **QUALIFICATIONS** | **EMPLOYER** | **WORK STATION** | **DURATION** |
|  |  |  |  |
|  |  |  |  |

**SECTION D: FINANCES**

1. (a) Sponsorship

Self-Sponsored Corporate Sponsored

**(b)** If corporate sponsored, please fill employer details

Company Name………………………………………………………………………………………………………………………………………….

Physical Address/Office location

Training Contact Person ………………………… ……….……………Position (Title) …………………………..……….………

Telephone contacts…………………………………………………………Official email……………………………………………………

**SECTION E: DECLARATION BY APPLICATION**

I hereby certify that the information given in this application is correct and complete to the best of my knowledge.

Signature. …………………………………………… Date.…………………......................................

**FOR OFFICIAL USE**

Admission Approved Admission Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Rejected ­­­­­­­­­­­­­­­­­­­­­­­­­­­ (*Reasons)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

Verified original certificates & *Attached deposit Slip for registration fees)*

Officer.............................. …………………………. Date..............................................................

Sign & Stamp..............................................................