

KENYA FILM SCHOOL



OFFICE OF THE REGISTRAR (ACADEMIC AFFAIRS) **APPLICATION FOR** **CERTIFICATE PROGRAMME**

Affix passport

Size photo

NOTES:

- (i) Application form should be fully completed in **BLOCK LETTERS**
- (ii) Attach certified copies of your K.C.SE Certificate/Result Slip.
- (iii) A Copy of your National ID card, and Birth Certificate.
- (iv) Attach one passport size photo.
- (v) Evidence of talent done.
- (vi) **All the above documents should be returned to: The Registrar Kenya Film School, P. O. Box 74934 - 00200 NAIROBI or upload them to filmschool@youth.go.ke**

SECTION A: PERSONAL DATA

1. Name:

.....

(Surname)

(Other names in full)

2. Date of Birth:.....**Gender:**.....

3. Nationality:

4. National ID. No./Birth Certificate No:

5. Marital Status:

6. Religion:

7. Contact Address:

Telephone Number: **Mobile No:**

County: **Sub-County:**

**Location.....Sub-
Location.....**

8. Email:

9. Next of Kin:Relation:

Permanent/Home Address:

Telephone No:

SECTION B: ACADEMIC QUALIFICATIONS

10. (a) Primary/Secondary School(s) attended and Qualifications obtained.

School	From	To	Qualifications Obtained

(b) Other relevant Qualifications.

Institution attended	From	To	Certificate Awarded

(c) State any other relevant Professional experience.

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SECTION C: MEDICAL HEALTH REPORT

11. (a) Do you have any Medical condition(S)?

(b) If Yes, Specify.....

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N/B: Please note that this information is required for the well-being of the students in the school.

SECTION D: DECLARATION

12. I certify that the information given in this application form is correct to the best of my knowledge.

Signed: **Date:**