

**AFFIX
PASSPORT
SIZE PHOTO**

APPLICATION FOR POST-GRADUATE STUDIES

REQUIREMENTS

NB: THREE copies of this form should be completed and returned to the Director, Post-Graduate Studies, Rongo University, P.O. Box 103-40404, RONGO, Tel. 0771349741

- (i) The form should be typed or completed in block letters.

Attach original application receipt. Application Fee (*Kshs. 2,000*)

- (ii) Attach a Passport size photo on each form
 (iii) Send duly filled referee forms (2) direct to the Director, Post-Graduate Studies
 (iv) Attach photocopies of both Academic and professional certificates and transcripts on each duly completed form.

SECTION A: PERSONAL DETAILS

1. Name

.....
 (Surname) (Other names in full)

2. Current Address

.....

3. Permanent Address (if different from the current address)

.....

4. Tel/Mobile No. E- mail of Applicant

5. Date of Birth.....Sex.....

6. Citizenship ID/Passport No.....

7. Marital Status.....

SECTION B: QUALIFICATION AND EXPERIENCE

8. University(ies) attended and the degrees you obtained including classification.

(a) First degree

- (i) University attended.....
- (ii) Dates attended
- (iii) Field of Study
- (e.g. History, Economics, Physics, Chemistry, etc)
- (iv) Degree awarded
- (e.g. B.Sc. Upper 2nd Class Honours)
- (v) Date awarded
- (b) Second degree:
 - (i) University attended
 - (ii) Dates attended
 - (iii) Field of Study
 - (e.g. History, Economics, Physics, Chemistry, etc)
 - (iv) Degree awarded
 - (e.g. B.Sc. Upper 2nd Class Honours)
 - (v) Date awarded
- (c) Other degrees/Diploma (where applicable).....
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- (d) Research experience (if any)
 - (List of publications, research reports, dissertation, theses etc)
 - Attach separate sheet if necessary
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- (e) Employment record:

Position	Place of employment	Date of employment (From-To)
.....
.....
.....
.....
- (f) Indicate competency in other languages other than English.....
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SECTION C: OTHER DETAILS

- 9. The higher degree applied for:
 - (i) Name of degree.....

- (ii) If PhD please attach a duly filled Concept Paper Form available in our offices/website.
- (iii) Faculty/School
- (iv) Department.....
- (v) Field of study/subject.....
- (vi) Mode of Study – Tick as appropriate
 - Part Time
 - Full Time
 - School based
 - Weekend
 - Distance Learning
- (vii) Place of Study - Tick as appropriate
 - Main Campus
 - Rongo Town
- (viii) Proposed date (Month) of commencement of study
- (ix) Expected date (Month & Year) of completion
- (x) Institution where research work is to be done if not at Rongo University.....

10. Indicate how you intend to finance your studies.....

11. Give names and addresses of two academic referees
- (i) Name
 - Address
 - Email.....Tel.....
 - (ii) Name
 - Address
 - Email.....Tel.....

Signed by the applicant Date:

SECTION D: OFFICIAL

TO BE COMPLETED BY THE UNIVERSITY

- (a) **RECOMMENDATION OF THE HEAD OF DEPARTMENT**
 - (i) (Enter below ADMIT or DO NOT ADMIT as may be applicable)
 -
 - (ii) Give reason(s) for NOT ADMITTING
 -
 -

- (iii) Recommended Course option(s) where the applicant is admissible
.....
.....
- (iv) Proposed University supervisor(s)
.....
.....
- (v) Other supervisor(s)
.....
.....

Signed by Head of Department..... Date.....

b) RECOMMENDATION OF THE DEAN OF THE SCHOOL

c)

- (i) (Enter below ADMIT or DO NOT ADMIT as may be applicable)
.....
- (ii) Reason(s) for NOT ADMITTING
.....
.....

Signed by the Dean..... Date and Official Stamp.....

d) RECOMMENDATION OF THE DIRECTORATE OF POST-GRADUATE STUDIES

- (i) (Enter below ADMITTED or NOT ADMITTED as may be applicable)
.....
- (ii) Reason(s) for NOT ADMITTING
.....
.....
- (iii) Admitted with effect from

Signed Date and Official Stamp.....
Director, Post-Graduate Studies

