

SECTION 2:

PERSONAL INFORMATION

Last (family) Name _____	Middle Name _____	First Name _____		
Date of Birth _____	Citizenship _____			
Country of Birth _____	Passport No*/ID No. _____			
Gender:	Female []	Male []		
Marital Status:	Single []	Married []	Divorced []	Widowed []
Country of Residence _____				
Do you have any disability? Yes [] No [] If yes state nature of disability _____				

SECTION 3:

PARENT(S)/GUARDIAN/ Next of Kin

Name _____	Relation to applicant _____
Address _____	Telephone _____
Email _____	Mobile _____

SECTION 4:

EDUCATION INFORMATION

Please list the schools attended,

Name of Institution	Area of Study	Duration of Study	Certificate attained
_____	_____	_____ to _____	_____
_____	_____	_____ to _____	_____
_____	_____	_____ to _____	_____

NOTE: THE INFORMATION PROVIDED HERE MAY BE USED TO VERIFY EDUCATION STATUS FROM EXAMINING BODIES

SECTION 5:

ADDITIONAL INFORMATION

a). How did you learn about College of Sustainable Agriculture for Eastern Africa?

<input type="checkbox"/> Newspaper	<input type="checkbox"/> Family/Friend	<input type="checkbox"/> Church Announcement	<input type="checkbox"/> College
<input type="checkbox"/> T.V	<input type="checkbox"/> Website	<input type="checkbox"/> Radio	<input type="checkbox"/> Exhibition
<input type="checkbox"/> Prospectus/flier			

b). Which is the most convenient place for you to pick the admission letter

1. CSAEA CAMPUS, KILIMABOGO	<input type="checkbox"/>	
2. SACDEP Head Office, Thika	<input type="checkbox"/>	
3. Posting	<input type="checkbox"/>	Address: _____
4. Email	<input type="checkbox"/>	E-mail address: _____
Any Other(specify)_____		

c). Statement on why you wish to study through College of Sustainable Agriculture for Eastern Africa? (Give a brief account)

To be a better farmer	<input type="checkbox"/>
To be a researcher	<input type="checkbox"/>
To be an agri-entrepreneur	<input type="checkbox"/>
To be employed by government	<input type="checkbox"/>
To be a development worker	<input type="checkbox"/>
Any Other(specify)	

SECTION 6:

CHECKLIST:

To be completed by the applicant: (please confirm that you have completed the form and attached the necessary documents by ticking the boxes below)

Section 1

Section 2

Section 3

Section 4

Section 5

Academic Certificates

The information given in this admission form is true to the best of my knowledge.

Signature _____ **Date** _____

Address Application package to:

Drop it to:

email your application to:

*The Principal,
CSAEA College,
P. O Box 1134
Thika -01000
Kenya*

CSAEA Campus, Kilimambogo

admissions@csasea.or.ke

Or

*SACDEP Thika Town Head office
Upperhill Road next to Central Memorial Hospital*