

# NAIROBI INDUSTRIAL INSTITUTE

SPINE ROAD KOMAROCK PLAZA P.O BOX 8490-00200 CITY SQUARE NAIROBI - KENYA CELL: +254 724-292 556 +254 733-879 446 EMAIL: i.infonii@yahoo.com

## **ADMISSION FORM**

Please read carefully the information before filling. Complete the form in **BLOCK LETTERS** and sign.

#### All entries in this form must be filled.

### A. PERSONAL DETAILS.

Full Names	I.D Number (attach	ו copy)		
Nationality	Gender	(M) (F)		
Address	Tel			
Email	District			
Where do you reside from (Tick as appropriate)				
Home ( <b>estate</b> )	Hostel Name			
Do you suffer from any health problem				
B. RELATIONSHIP				
Parent/Guardian Details				
Name	Address			
Relationship	Tel			
C. EDUCATIONAL BACKGROUND				
Secondary school attended				
From year	To year			
Mean Grade Attained (attach copy)				
D. COURSE DETAILS				
Name and level of course you wish to take.				
Starting date distance learning)		(Day/Evening/Weekend/Long		
Course Exam Body				

#### E. OTHER DETAILS

How did you get to know Nairobi Industrial Institute?

Relative, Friend or Colleague	Website	Directory
Poster/Fryers	Radio/TV	others (specify)
News paper	Sign board	

#### **TERMS AND CONDITION OF ADMISSION**

1. Course fees must be paid in accordance with the fee schedule.

- 2. Fees once paid are not refundable or transferrable
- 3. NII accepts no liability whatsoever for any injuries inflicted during the course or training.

4. **NII** does not accept any liability for loss or damage to any property brought or left in the premise by student.

5. Students will be charged for any damages caused to equipments by their negligence.

6. Certificates will only be awarded after the fulfillment of all the course requirements.

#### **DECLARITION (MANDATORY)**

I.....declare that the information given in this application form is true and correct to the best of my knowledge.

I further certify that I have read, understand and agreed to comply with the terms and conditions stipulated in this form.

Sign.....

Date.....

#### FOR OFFICIAL USE ONLY

Date of Admission	Admission No
Campus of Registration	Register Name
State which class Session the student will attend	
Sign	

#### FOR CAMPUS PRINCIPAL / MANAGER

Form posted by
Stamp
Date