

APPLICATION FORM

Serial No:

THE KENYA SCHOOL OF REVENUE ADMINISTRATION

INSTRUCTIONS

Complete both sides in CAPITAL Letters.

Attach:

1. Copy of Your National ID or passport
2. Certified copies of your academic certificates and transcripts
3. Two coloured copies of your passport size photo

NB: The form is to be returned together with the non-refundable fees of Kshs 2,000.

PERSONAL DETAILS

Names in Full: Surname			Other name (s)		
Date of Birth: (MM)	DD	YY	Female <input type="checkbox"/>	Male <input type="checkbox"/>	
Nationality:			I.D or Passport No		
Mobile:			Email:		
Postal Address:		Code	Town		

NAME OF KIN/GUARDIAN /CONTACT PERSON INCASE OF AN EMERGENCY

Name:		Relationship:
Tel:		P.O. Box

EMPLOYMENT DETAILS (IF APPLICABLE)

Company's Name:		Position Held:	
Postal Address		Code	Town
Mobile:		Email:	

HOW DID YOU KNOW ABOUT KESRA (Please tick one)

Newspaper <input type="checkbox"/>	TV/Radio <input type="checkbox"/>
Friend <input type="checkbox"/>	Social Media <input type="checkbox"/>
Others _____	

ACADEMIC AND PROFESSIONAL QUALIFICATION (Attach certified copies of your certificates)

NAME OF THE INSTITUTION	FROM	TO	QUALIFICATION OBTAINED

REGISTRATION DETAILS

a) Course applying for _____

b) Semester _____ January May September

c) Mode of Study Day Evening Weekends

d) Campus: Nairobi Mombasa

e) How do you intend to finance your study?
Self-sponsored Company sponsored Others _____

DECLARATION

I certify that the information I have provided is correct

Signature _____ Date _____

SECTION H FOR OFFICIAL USE ONLY

Recommendation of Department ACCEPT REJECT

Reason(s) for rejecting application _____

Approved

Course: _____ Amount payable _____

Principal Name: _____ Date: _____ Signature _____

FEES PAYBLE TO:

The National Bank of Kenya
Kenya Shillings Account

A/C NO: 01023015000900 Branch: Times Tower Branch
Account Name: Kenya school of Revenue Administration

The National Bank of Kenya
USD Account

A/C NO: 02020015000900 Branch: Times Tower Branch
Account Name: Kenya school of Revenue Administration

NB: Indicate the student's names on the deposit slips. (Compulsory)



Kenya School of Revenue
Administration

The Deputy Commissioner Academic & Student Affairs

Times Towers 8th Floor • P.O. Box 48240 - 00100 Nairobi • Email: admissions@kra.go.ke

Telephone numbers: 020 2814010 / 020 2814158 / 020 2810000