



# KENYA UTALII COLLEGE

## APPLICATION FORM FOR INTERNATIONAL STUDENTS (Foreign students)

READ THE APPLICATION INSTRUCTION BEFORE COMPLETING THIS FORM

Attach a non-refundable application fee of **US\$50.-** in form of Bank Draft payable to **Kenya Utalii College**. Do not send cash. This Form should be completed in Block Letters or typed. Names given on this form will be the names to be used on all official records in future.

Send to:

**Principal/CEO**  
**P.O. Box 31052 -00600**  
**NAIROBI**  
**KENYA**  
Tel: 254-20-8563540/1-7 or 8560518 or 8561201/2/7 or 2458627 or 2686803 or 2686997  
Mobile: 0722205891/2 or 0733410005 or 073341600584  
Fax: 254-20-8560514  
E-mail: [admissions@utalii.co.ke](mailto:admissions@utalii.co.ke)  
Website: [www.utalii.co.ke](http://www.utalii.co.ke)

AFFIX RECENT  
PASSPORT  
PHOTOGRAPH

<input type="checkbox"/> Mr.	Last Name	Middle Name(s)	First Name
<input type="checkbox"/> Mrs.			
<input type="checkbox"/> Ms.			

### Permanent Address

Street Address:	P.O. Box Number:
City:	Country:
Zip/Postal:	
Telephone:	Fax Number:
E-mail:	

### Current Mailing Address (if different from above)

Street Address:	P.O. Box Number:
City:	Country:
Zip/Postal:	
Telephone:	Fax Number:
E-mail:	

### Particulars of Next of Kin

Name:	Relationship:
Street Address:	P.O. Box Number:
City:	Country:
Zip/Postal:	
Telephone:	Fax Number:
E-mail:	

### Personal Information

### Gender (Please Tick)

Date of Birth: Month:	Day :	Year:	Female <input type="checkbox"/>	Male <input type="checkbox"/>
Place of Birth:	Citizenship:			
Passport No.:	Marital Status: Single <input type="checkbox"/>	Married <input type="checkbox"/>	Widowed <input type="checkbox"/>	Divorced <input type="checkbox"/>

### Enrolment Information

COURSE	COURSE REF.	DURATION	COURSE(S) APPLIED FOR*
Hotel Management	MA	3 years	
Travel and Tourism Management	TTM	3 years	
Tour Guiding and Administration	TG	1 ½years	
Travel Operations	TO	1 ½years	
Front Office Operations	FO	1 ½years	
Food Production	FP	1 ½years	
Housekeeping and Laundry	HL	1 ½years	
Food and Beverage Service & Sales	FBS	1 ½years	

\*(Rank your Course selection in order of preference if you wish to be considered for alternative courses apart from your first choice). **Please turn over**

## Schools Attended

Name of School	Address	Period	
		From	To

### O'Level (Secondary School) results:

Year \_\_\_\_\_ Index No. \_\_\_\_\_ Grade \_\_\_\_\_

Subjects	Grade	Subjects	Grade
English Language		Kiswahili	
Mathematics		Art and Design	
History and Government		Agriculture	
Geography		Biological Sciences	
Economics		Physical Sciences	
Commerce		Religious Education	
Accounts		Social Education and Ethics	
Home Science		Music	
Language ( <i>Specify</i> ):		Other ( <i>Specify</i> ):	

### A-Level (High School) Results:

Year \_\_\_\_\_ Index No. \_\_\_\_\_ Grade \_\_\_\_\_

Subjects	Grade	Subjects	Grade

### Other Institutions/Colleges attended

Name of Institution/College	Duration	Nature of Training	Certificate obtained

### Working Experience (in the Hotel and Tourism industry only)

Name and address of employer	Nature of work	Duration

Attach copies of all certificates/testimonials: personal, educational and work experience.

### DECLARATION

*I certify that the information I have given in this application is complete and correct I am aware that false information is grounds for disqualification/expulsion.*

*Applicant's Signature:* \_\_\_\_\_

*Date:* \_\_\_\_\_