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P.O. Box 1699-50200
Bungoma, Kenya
Tel: +254 20-2028660/+254708-085934/
+254 734-831729

E-mail: enquiries@kibu.ac.ke
Website: <http://www.kibu.ac.ke>

Office of Registrar (Academics Affairs)**APPLICATION FOR ADMISSION 2019/2020 ACADEMIC YEAR****APPLICATION FOR DOCTOR OF PHILOSOPHY****Note:**

- i. Three copies of this form should be completed and returned to:
The Registrar (Academic Affairs)
Kibabii University,
P.O. Box 1699 - 50200,
BUNGOMA - KENYA

- ii. The form should be completed in block letters

SECTION A

1. Name.....
(Surname) (First Name) (Other Names)
2. Current Address.....
.....
Province /State.....
Telephone No (s)..... Email:.....
3. Permanent Address (if different from the current address).....
4. Date of Birth..... Male/Female.....
5. Citizenship..... Passport No:

**Kibabii University ISO 9001:2015 Certified**

6. Marital Status.....

7. Name and Address of next of kin (state relationship).....

* Your application must be accompanied with an application fee of **US\$20 or Kenya Shillings two thousand only (Kshs 2,000.00)** for Kenyans and East African citizens only and US\$50 for the rest of the world payable to Kibabii University.

SECTION B

8. Institutions attended and qualifications attained

S/No.	Name of Institution/School	Qualification attained

9. University education and equivalent qualifications obtained (state the dates you attended and the degree(s) you obtained including the classifications). You should attach copies of certificates and academic transcripts showing the grades obtained in each course.

a) First degree

- i. University attended.....
 Dates attended.....
- ii. Field of Study.....
 (e.g. Bachelor of Science, Physics, Chemistry etc)
- iii. Degree awarded.....
 (e.g. B.Sc.. Upper 2nd class Honors)
- iv. Date awarded.....

b) Other degree/diploma (where applicable)

.....

c) Research experience (if any)

(List of publications, research reports, dissertation, thesis etc) Attach separate sheet if necessary



.....
.....

d) Employment record

S/No.	Position	Place of employment	Date of employment

SECTION C

10. Graduate Degree/Programme applied for

- i. Name of Degree.....
- ii. Department/School/Centre/Institute.....
-
- iii. Field of Study.....
- iv. State whether full time or part time.....
- v. Date of beginning studies.....
- vi. Expected date of completion.....

11. Name and address of financial sponsor.....
.....

12. Name and addresses of THREE academic referees:

- (i).....
- (ii).....
-
- iii).....
-

Applicant's Signature..... Date.....

Applicants must ensure that referees send their recommendation on time to the Registrar (Academic Affairs) for the applications to be considered.

Academic referees should be people who are familiar with the candidates' work and have records of the same.



SECTION D

TO BE COMPLETED BY THE UNIVERSITY

- A. RECOMMENDATION OF THE DEPARTMENTAL GRADUATE STUDIES COMMITTEE
(Enter below **ACCEPT** or **REJECT** as may be applicable)

Signed by:

.....
(Chairman, Departmental Graduate Studies Committee (DGSC))

Date.....

- B. RECOMMENDATION OF THE FACULTY/SCHOOL GRADUATE STUDIES COMMITTEE (F/SGSC).
(Enter below **ACCEPT** or **REJECT** as may be applicable).

Signed.....
(Chairman, Faculty/School Graduate Studies Committee (DGSC))

Date.....

- C. RECOMMENDATION OF THE BOARD OF THE SCHOOL OF GRADUATE STUDIES, (BSGS).
(Enter below **ACCEPTED** or **REJECTED** as may be applicable).

Signed.....
(Dean, School of Graduate Studies)

Date.....

OFFICIAL STAMP:





KIBABII UNIVERSITY

P.O. Box 1699-50200
Bungoma
Kenya
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Office of Registrar (Academics Affairs)

APPLICATION FOR ADMISSION 2019/2020 ACADEMIC YEAR

REFEREE'S LETTER OF RECOMMENDATION (MUST BE LECTURERS FROM RECOGNIZED UNIVERSITY/UNIVERSITIES)

Name of Applicant:

1. Name of the Referee: Prof./Dr./Mr./Mrs./Ms.
2. Occupation
3. Institution.....
4. Address.....
.....
5. Tel..... Email

The above named has applied for admission to the programme:.....
..... of Kibabii University.

To enable us assess the applicant's suitability for the programme, kindly evaluate the applicant in the areas mentioned below. (Please tick (√) as appropriate):

	Excellent	Very Good	Good	Average	Below Average
Intellectual Ability					
Motivation					
Diligence					
Ability to work with others					



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Capacity for persistent and independent Study					
Ability for initiative and imaginative thought					
Potential for productive scholarship					
Oral and written expression in English					

Other capabilities/talents worth mentioning:

.....

.....

.....

Suitability of the applicant to pursue the graduate programme.

1. For how long have you known the applicant and in what capacity?.....
.....
2. Is the applicant capable of producing original work?.....
.....
3. What is the basis for your response in 2 above?.....
4. Has he/she pursued any similar degree/graduate programme that you are aware of?.....
5. What do you consider to be the applicant’s weaknesses?.....
.....

SignatureDate

Note to the referee: This is confidential information on the applicant. Kindly place the form in an envelope, seal it and sign your name across the seal on the back of the envelope. You may send it through the applicant, but it should be submitted unopened to the University. Alternatively, you may send it directly to Kibabii University through the address below.

Note to the applicant: You must ensure that this recommendation is submitted to the Office of the Registrar (Academic Affairs) under confidential cover.

Registrar (Academic Affairs)
Kibabii University
P.O. Box 1699-50200
BUNGOMA – KENYA



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