

<b>KIBABII UNIVERSITY – ISO 9001:2015 QUALITY MANAGEMENT SYSTEMS</b>		
<b>ISSUED FOR USE IN 2020</b>	<b>STAFF TRAINING AND DEVELOPMENT FORM</b>	<b>REF: KIBU-ADM-F-042</b>



**KIBABII UNIVERSITY**

## **STAFF TRAINING AND DEVELOPMENT FORM**

**2020**



**Kibabii University ISO 9001:2015 Certified**  
**Knowledge for Development**

**PART 1 (To be filled by Applicant)**

Name of applicant: ..... PF No: .....

Designation: ..... Department: .....

Signature: ..... Date: .....

**PART 2: Type of employment (*Tick where applicable*)**

☐ Permanent & Pensionable    ☐ Contract    ☐ Adjunct

**PART 3: Type of training required (*Tick where applicable*)**

☐ Academic    ☐ Seminar    ☐ Workshop    ☐ Professional

☐ Others (*fill in the spaces provided below*)

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**Importance of Training (To be filled by Applicant)**

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**PART 4: Venue for Training.....**

Duration.....Start date.....End date.....

Cost of the training.....

**PART 5: To be filled by Head of Department**

Name of HoD/CoD: .....

Designation: ..... Department: .....

**RECOMMENDATIONS.....**

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Signature: ..... Date: .....

**PART 6: Budget Approvals by Finance Officer**

Budget Allocation for Training \_\_\_\_\_ Balance \_\_\_\_\_



Remarks.....  
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Name.....Sign.....Date.....

**PART 7: Comments by Registrar (Administration and Human Resource)**

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Signature .....Date.....

**PART 8: Comments by Deputy Vice Chancellor (AFD)**

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Signature .....Date.....

**PART 9: Recommendations by University Staff Establishment, Training and Development Committee (where applicable)**

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**Approved/Not approved:** ..... **Remarks** (If Not Approved give reasons)

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**Signed by S.E.T.A Chairperson**

Name.....Sign.....Date.....

**PART 10: AUTHORIZATION BY THE VICE-CHANCELLOR**

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.....  
Signature .....Date.....

