



KENYA METHODIST UNIVERSITY

Main Campus, Meru; P.O BOX 267 - 60200 , Meru —Kenya, Tel: 254-064-31206, 0724256162, 0734310655

Nairobi Campus: P.O BOX 45240 - 00100, GPO, Nairobi . Tel: 254-020-248172, 0725751878, 0735701311

Mombasa Campus: P.O. BOX 89983—80100 , Mombasa . Tel: 0748414998, 0743084019

APPLICATION FOR ADMISSION TO POSTGRADUATE STUDIES

INSTRUCTIONS

1. Read each item carefully and fill in capital letters.
2. Attach copies of certificates and official transcripts.
If they are not in English, send translated certified copies.
3. Attach one recent passport size photograph to the application form and a copy of National ID/Passport
4. No Application will be processed without payment of the application fees. Use pay bill 7528493 account is your name.

Application No:

Receipt No:

Application Fee:

PhD : KSh. 5,000

Masters: KSh. 2,000

Postgraduate Diploma: Ksh. 2000

SECTION A: Personal Data

1. Applicant's Name
(As it appears on your KCSE/O'level, A/level or previous Academic documents)
2. Gender (Male/Female)
3. Date of birth County of birth
4. Marital status (Single/married/widowed)
5. Religion Denomination
6. Nationality If Kenyan, provide County:.....
7. National ID Card No. /Passport No(attach a copy).
8. Current Contacts:
P.O. Box:Town:.....Code:.....
TelE-mail

9. How do you plan to finance your studies: Self-financed ☐ Scholarship ☐

If scholarship, please provide sponsor's name:

Contacts: Postal: Telephone:.....

Email:

10. Next of Kin details

Name: Relationship

P.O. Box Town/CityCode

Phone.....Email:

SECTION B: Programme Particulars

11. Indicate the name of the programme that you wish to be considered for

Option 1:.....

Option 2:.....

Level of Programme	Tick
Postgraduate Certificate	
Postgraduate Diploma	
Masters	
Doctorate	

12. Indicate the campus/centre

Campus	Tick
Main (Meru)	
Nairobi	
Mombasa	
Meru Town Centre	

13. Preferred Mode of Study (Tick as appropriate)

Mode of Study	Tick
Part Time - Evening	
Part Time – Weekend	
Online & Distance Learning	
Full Time	

14. Expected Intake: Academic Year:..... Trimester ☐1 (Jan)☐2(May)☐3(Sep)

15. How did you know about KeMU?

KeMU Website ☐ Prospectus ☐ Newspapers ☐ Television ☐ Social Media ☐ Career Day ☐ Exhibition ☐

Radio ☐ High School ☐ Any other Referred by KeMU Staff Name

PF No.....KeMU Student Name..... Reg. No.....

16. State briefly why you have chosen to carry out your postgraduate studies in the selected area.....

.....

SECTION C: Education Background

17. Secondary and Post-Secondary Education details (Arrange in descending order).

Attach copies of Certificates and Transcripts.

Institution Name	From	To	Examination	Qualifications Obtained

SECTION D: Employment /Work Experience

18. Give a brief history of your work experience.

Years	Name of Institution	Position Held	Description of Duties

SECTION E: Referees

17. At least one referee must have taught the applicant at University /College Level

a. Name of Referee:.....

Designation:.....

Address:Cell phone:

Email:

b. Name of Referee:.....

Designation:.....

Address:

Cell phone: Email:

c. Name of Referee:.....

Designation:.....

Address:

Cell phone: Email:

SECTION F: Personal Statement

18. I certify that the information given on this form is correct to the best of my knowledge and belief.

Signature of the applicant:.....

Date:.....

Attach an abridged CV to this application.

SECTION G: For Official Use Only19. Recommendation of the Department: ☐ Accepted ☐ Rejected ☐ Deferred to.....

Comments.....

Chairman's/Postgraduate Coordinator's Signature.....Date:.....

20. Recommendations of the Board of Postgraduate Studies

a) Received: Date.....

b) Recommendation of the Board : Accepted ☐ Rejected ☐

c) Comments:

d) Dean's Signature: Date:

21. Registrar (Academic Affairs)Accepted ☐ Not Approved ☐

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

When you complete this application form send to:

The Registrar (Academic Affairs)

Kenya Methodist University

Main Campus, P.O. Box 267 - 60200 Meru

Or Nairobi Campus, P.O. Box 45240—00100 Nairobi

Or Mombasa Campus, P.O. Box 89983-80100 Mombasa

OR

Scanned Copies of this application to be sent to:

admission.office@kemu.ac.ke and/or info@kemu.ac.ke