



University of Eastern Africa, Baraton

TECHNICAL, VOCATIONAL EDUCATION AND TRAINING INSTITUTE-TVET

Motto: Building Skills



APPLICATION FORM

P.O. BOX 2500-30100, Eldoret | Email: info@tvvet.ueab.ac.ke or admissions@tvvet.ueab.ac.ke Phone: +254714 333 111/
+254748267793/+25473 3852 751/+254722 805 570/ +254710719042

Kindly verify your submission by ticking the confirmation box, then send your documents to admissions@tvvet.ueab.ac.ke

- | | |
|--|---|
| ☐ Filled Application Form and a Passport size photo (<i>Without and jewelry, dread-locks</i>) | ☐ Copy of High school School Leaving Certificate |
| ☐ Copy of Certificate/Diploma/undergraduate (for up-graders) | ☐ Copy of Birth Certificate |
| ☐ Copy of KCSE/High School Certificate/Results Slip | ☐ Copy of the National ID Copy (If applicable) |
| | ☐ Payment message/ receipt for application fee |

First Name _____ Second Name(s): _____ Last Name: _____
(Note: Order of names as they appear on your KCSE or High School Certificate)

Phone No: _____ Email: _____ Gender: ☐ Male ☐ Female

Date of Birth (dd/mm/yyyy): ____/____/____ Marital Status: ☐ Single ☐ Married Nationality: _____

County: _____ Location: _____ Sub-location: _____

Village: _____ Passport/National ID/Birth Certificate: _____

Language of instruction at secondary level or High school: _____

Religion: _____ Denomination: _____

State the name of the church you attend: _____

Recent
passport
size
photo

Term and Year for which you are applying for? ☐ 1st (August) ☐ 2nd (January) ☐ 3rd (May) Year _____

Program Level: ☐ Level 6 (Diploma) ☐ Level 5 (Certificate) ☐ Level 4 (Artisan)

Specific area of study: _____

While at UEAB, where do you plan to stay? ☐ University hostel ☐ Staff home ☐ Off campus

How did you find out about UEAB? Through: ☐ UEAB Student/Worker (Name) _____

☐ Career Exhibition ☐ Family Member ☐ Alumni ☐ Church Promotions ☐ Newspaper ☐ Television

☐ Online Search (Google) ☐ Social Media (Face-book, Whatsapp, instagram.....) ☐ Other _____

Personal Health Information: ☐ Good ☐ Fair ☐ Poor

Do you have any special need? ☐ Yes ☐ No If yes, tick the need ☐ Mental ☐ Physical ☐ Hearing

☐ Sight ☐ Sensory ☐ Other _____

Recognition of Prior Learning (RPL): Have you completed any professional certifications, vocational qualifications, short courses, or specialized training programs that are not reflected in your academic transcripts and that you believe demonstrate university-level knowledge or skills relevant to your desired program of study, and that you wish to be considered as an entry requirement? ☐ Yes ☐ No If yes, give more information as follows: Mode of Study: ☐ Online ☐ Face to Face ☐ Blended How were you evaluated?

☐ Written exams ☐ Projects ☐ Practicals ☐ Assignments ☐ Certificate (s) or Evidence of Completion:

☐ Yes, I have a certificate or transcript ☐ No, but I can provide other evidence ☐ No documentation available

Have you ever been employed? ☐ Yes ☐ No If yes, Employer(s) details:

Name _____ Phone _____ Email _____

Name _____ Phone _____ Email _____

A Seventh-Day Adventist Institute of Tertiary Learning

Exodus 35:35 He has filled them with skill to do all kinds of work as engravers, designers, embroiderers in blue, purple and scarlet yarn and fine linen, and weavers—all of them skilled workers and designers. NIV

Family Information:

Father's Name: _____ Phone No: _____ Email: _____

Religion: _____ Denomination: _____

Mother's Name: _____ Phone No: _____ Email: _____

Religion: _____ Denomination: _____

Is either of your parents employed by the Seventy-day Adventist Church? Yes No

If yes, name the employer _____

Legal Guardian/Sponsor's Name (If not not parents):

Name: _____ Phone No: _____ Email: _____

Statement of Consent: ☐ Parent ☐ Guardian ☐ Sponsor ☐ Self ☐ Other _____

☐ I consent to the applicant's enrollment at the University of Eastern Africa, Baraton, and affirm my support for the university.

Name: _____ Signature _____ Date _____

Statement of Financial Responsibility by: ☐ Parent ☐ Guardian ☐ Sponsor ☐ Other _____

☐ I fully accept responsibility for the payment of the applicant's complete tuition and related fees at the university of Eastern Africa, Baraton. I hereby undertake to ensure that all payments are made in accordance with the University's official time-lines and prescribed procedures.

Name: _____ Signature _____ Date _____

Applicant's Commitment:

☐ I hereby affirm that the information provided in this application is accurate, complete and truthful to the best of my knowledge. Upon admission to the University of Eastern Africa, Baraton, I solemnly commit to upholding its regulations, standards and expectations with integrity in both academic and spiritual life. I will adhere to the university's principles outlined in the Student Handbook and Official Communications, conducting myself in a manner consistent with the university's Seventh-day Adventist heritage. I declare myself to the growth of wisdom, character, and service through a Christ-centered education, guided by the words of *Colosians 3:23 (KJV): "And whatsoever ye do, do it heartily, as to the Lord, not unto men."*

☐ By submitting this application for admission to the University of Eastern Africa, Baraton (UEAB), I hereby acknowledge and consent to the collection, processing, storage, and sharing of my personal data by the University in accordance with the Kenya Data Protection Act, 2019; and Data Protection Policy of the University of Eastern Africa Baraton

Name: _____ Signature _____ Date _____

If the applicant is a Minor (below 18 years): ☐ Parent ☐ Guardian ☐ Sponsor ☐ Other _____

☐ I hereby give consent for the collection, processing, storage, and sharing of the personal data of the minor named above by the University, authorized government agencies and regulatory bodies, in full compliance with the provisions of the **Kenya Data Protection Act (2019), the Office of the Data Protection Commissioner's Guidance Note on Processing Children's Data (2025) and Data Protection Policy of the University of Eastern Africa Baraton**

Name: _____ Signature _____ Date _____

Application Fee (Non refundable) of Kenya Shillings 1,000

Mpesa

Paybill number: **4077813**

Account number: **TVET APPLICATION**

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