



MERU UNIVERSITY OF SCIENCE & TECHNOLOGY

P.O. Box 972-60200 Meru-Kenya
Tel: 020-2092048, 020-2069349, 061-23092, 064-30320 Cell Phone: +254 712524293, +254 789151411
+254 725 330826, +254 752 839270, +254 736 229094, 254 725 330827

STUDENT PERSONAL DETAILS

Information in this form is intended to help the office of the Registrar (ARS) understand the student better. It will be used for purposes of improving welfare while at the University. (To be completed in TWO copies and in capital Letters) One copy to be retained by the Candidate.

1. Full Name
(Mr/Mrs/Miss) Surname First Name Initial/Other

2. National Registration Number (ID)

3. University Registration Number

Year of study First second third

4. Date of Birth Date Month Year

5. Religion 1. Protestant 2. Catholic 3. Muslim 4. Any other

Do you require a Government loan? YES No

6. Nationality 1. Kenyan 2. Non Kenyan Specify Country.....

7. Mobile Number : _____

8. Home Contact Address (where you can be contacted during vacation)

P.O. Box Town Code C/o

9. a) Marital status 1. Single 2 Married

b) Name and Address of spouse (If married)

Surname

First Name

Other Initials

P.O. Box (Address)

Code

Town

Telephone (Landline)

Mobile Phone Number

Email Address

Full Name of Parent/Guardian

Surname

First Name

Other Initials

10. Address of Parent/Guardian

P.O. Box (Address)

Code

Town

Telephone (Landline)

Mobile Phone

E-mail Address

11 Occupation of Parent/Guardian.....

ID No.

12 a) Name of the Next of Kin

Surname

First Name

Other/Initial

ID No.

b) Address of the Next of Kin

Telephone (Landline)

Mobile

E-mail Address

13. Place of Birth: Village _____

Location: _____ Name of Chief _____

Division _____ District: _____ County _____

14. Place of Permanent Residence: Village: _____ Name of Assistance Chief _____

Nearest Town _____ Location: _____ Name of Chief _____

Division _____ District: _____ County: _____

15. Give Name and Addresses of two persons who can be contacted in case of emergency

Grid boxes for Name and Address of the first person.

Grid boxes for P.O. Box, Code, and Town of the first person.

Relationship

P.O. Box (Address)

Code

Town

Grid box for Telephone (landline).

Grid box for Mobile.

Grid box for E-mail Address.

Telephone (landline)

Mobile

E-mail Address

Grid box for Surname.

Grid box for First Name.

Grid box for Initials.

ii) Name

Surname

First Name

Initials

Grid box for Relationship.

Grid box for P.O. Box (Address).

Grid box for Code.

Grid box for Town.

Relationship

P.O. Box (Address)

Code

Town

Grid box for Telephone (landline).

Grid box for Mobile.

Grid box for E-mail Address.

Telephone (landline)

Mobile

E-mail Address

16. Name and Address of secondary School attended

Grid box for Name.

Grid box for Address.

P.O. Box

Town

Grid boxes for Dates From and To.

17. KCE / KCSE or equivalent results (Subjects & Grades)

Grid boxes for Subjects and Grades.

Mean Score/Division (where applicable)

18. Any other Institution attended and qualifications attained

a) Name of Institution (You may use abbreviations)

Grid box for Name of Institution.

b) Qualifications 1. Diploma 2. Certificate 3. Specify Field

I certify that the information I have provided is correct

Signature Date: