



LETTER OF ADMISSION

NAME.....FOLIO.....
 COURSE.....DURATION.....
 ADDRESS.....

RE: INVITATION TO PURSUE A COURSE AT RUNYENJES TECHNICAL AND VOCATIONAL COLLEGE

I am pleased to inform you that you have been offered a vacancy to pursue the course indicated above. You should report at the institute between 8.00 a.m. and 4.00pm on.....

FEES STRUCTURE

COURSE	TERM 1	TERM 2	TERM 3	TOTAL
Artisan and craft certificates in all courses	19,620	18,400	18,400	56,420
Diploma in all courses	19,620	18,400	18,400	56,420

Government Capitation is Kshs 30,000 and the balance kshs 26,420 to be paid by the parent/guardian.

	Kshs
First Term	9,620
Second Term	8,400
Third Term	<u>8,400</u>
	<u>26,420</u>

Notes

1. All new applicants will pay an additional fee of the following

a). Registration fee	500	:	paid once
b). Students Council	400	:	paid Termly
c). Students ID	<u>300</u>	:	Paid once
	<u>1200</u>		
- Total**
2. Students placed by Kuccps Should pay Kshs 1,500. This money is remitted by the institution to Kuccps
3. Fees once paid not refundable
4. Personal cheques or cash are not acceptable
5. School fees is payable through bankers cheque, money order, direct deposit
EQUITY BANK A/C NO...0190274872116, Embu Branch
6. An appropriate commission will be charged for clearing banker's Cheque, it will be reflected on your fees account
7. Students to make their own accommodation and meals arrangements.
 However, Accommodation is available in the neighborhood
8. KNEC Exam fees is as per the course or subject, not included in the fees
9. **You can apply for HELB loan/Bursary or CDF Bursary from the County Government**

The institute is located about 1.5 Kms from Karurumo Market along Ena-Ishiara road. From the stage, ask direction to Kasafari, about 500 mtrs, turn right on the second junction, then turn after another 500mtrs, drive straight for more 500 mtrs to the college gate.

Elizabeth Kimathi Laichena (Mrs)
Principal

WELCOME TO RUNYENJES TECHNICAL AND VOCATIONAL COLLEGE



MEDICAL FORM

RTVC/ADM/REG/002

NOTE: Applicants for entry to the Institution must get this form filled/completed by a registered Doctor.

PAYMENT FOR THE EXAMINATION IS THE SOLE RESPONSIBILITY OF THE APPLICANT.

NAME:.....COURSE:.....
ADM NO.....

MEDICAL CERTIFICATE OF FITNESS

This is to certify that.....(student's name) invited to take
.....(Course) in your institute has been checked on the fitness thus;-

1. Eyes and vision
Unaided Right - Left
Aided Right - Left
Colour Blind
Visual field

2. Nose and throat
Is nasal breathing habitual? Adenoids

3. Ears -Right
Hearing voice -Left

4. Mouth and Teeth

5. Glands in the neck

6. Check Heart, lungs with special reference to any tubercular tendencies

7. Spinal column

8. a) Urine (For female students please state if pregnant or not)
b) Stool.

9. Spleen Liver
Piles and varicose veins

10. Any other weakness, defects or disease: e.g.
cholera or other nervous disorders.
Venereal diseases or rheumatic tendency

11. General observations if care is desirable in any special direction please give particulars.

Signature of the registered medical practitioner:
Address:Official Stamp and Date:



RTVC/ADM/REG/003

Date of admission: _____ NO: _____

Attach Recent

Color Passport

Size Photograph

SECTION 1: TRAINEES PERSONAL DETAILS.

Full name: _____
 Gender: _____ Date of birth/age: _____ marital status _____
 ID NO: _____ (attach a copy of your ID card)
 Tel NO _____
 PO BOX _____ Postal code _____
 County: _____
 Home district: _____ Constituency: _____
 Division: _____
 Location: _____ Sub location _____
 Village/Estate _____
 Highest level of education/training: _____
 Grade obtained: _____
 Year completed: _____ Exam index no: _____ (Attach copy of certificate/result slip)
 Previous institution/school: _____
 P O BOX _____ Postal code: _____
 Any disability :(YES/NO) _____ IF yes (MILD/SEVERE) _____
 Specify: _____

SECTION II: FAMILY DETAILS

Father's name: _____
 ID NO : _____ (Attach copy of ID card)
 TEL NO: _____
 Occupation: _____
 P.O. BOX: _____
 Is father alive? (YES/NO) _____ (If no, attach evidence of death)
 Mother's name _____
 ID NO _____ (Attach copy of ID card)
 TELNO _____
 Occupation _____
 P.O. BOX _____
 Is mother alive? (YES/NO) _____ (If no, attach evidence of death)

Guarantee to pay fees (if not parents, state relationship and occupation)

Name Relationship..... Occupation.....

Address..... ID NO.....(attach ID copy)

Tel Signature.....

Give names and address of two persons who can be contacted in case of emergency.

Name	Relationship	Tel No
1.
2.

Which games and/sports are you interested in?.....

Which clubs/societies are you interested in?.....

How did you get to know about the college?.....

Please give any information you think is useful for you to communicate to the college
.....
.....

SECTION III: COURSE DETAILS

Course: _____
Duration: _____ Level: _____
Fees payable per year: Kshs. _____

SECTION IV: TRAINEE’S DECLARATION.

I.....IDNO.....,declare that I undertake to abide by the regulations governing the institution, conduct and discipline of the students at Runyenjes technical Training Institute and confirm that the information is true to the best of my knowledge and I am aware that giving false information will lead to automatic disqualification.

Signed: _____ DATE: _____

NAME: _____

Witnessed parent/Guardian..... Date.....



RUNYENJES TECHNICAL & VOATIONAL
COLLEGE
PO BOX 239-60103, RUNYENJES
E-mail: Runyenjestti@gmail.com

MINISTRY OF EDUCATION
PO BOX 9583-00200
NAIROBI

RTVC/ADM/REG/004

GENERAL REQUIREMENTS

1. Uniform

There is no uniform for the institute. However, you are advised to dress decently always.

2. Institute rules will be issued on admission and all students must abide by them.

3. You will be required to have the following Compulsory Documents on Admission;

- a. Course textbooks listed.
- b. Medical certificate duly filled.
- c. Original and clear copies of your KCSE Certificate or result slip
- d. Three photocopies of National ID card both sides. *(Yours and that of your parent/guardian)/Waiting card*
- e. Original and copies of your leaving certificate.
- f. Three recently taken passport size photographs
- g. Original & copies of your Birth Certificate.
- h. Institute rules and regulations
- i. Enough writing materials

4. Personal data.

The attached personal data sheet must be completed on admission

5. Medical Certificate

The enclosed medical certificate must be completed, signed and stamped by a Government medical officer