

## **TECHNICAL UNIVERSITY OF MOMBASA**

Office of the Registrar (Academic Affairs)

## **NEW STUDENTS ADMISSION FORM**

(To be filled in DUPLICATE)

Provide your names in the order you would like them to appear in your final Certificate and Transcript.

• •	ed after the two weeks registra cated in the Students' Handbook	
FIRST NAME	MIDDLE NAME	LAST NAME (surname)
REG. NOC	OURSE	
DEPARTMENT	FACULTY	
1. a) DEPARTMENTAL DESK:	VERIFICATION OF STUDENT	S ORIGINAL DOCUMENTS
Document	Indicate Number	Confirmed (Tick)
National ID/Birth Cert/Passpor	t No.	
K.C.S.E Index Number		
Academic Certificate( Certifica Diploma or Degree)	te,	
COD/LECTURER'S NAME		DATEal Rubber Stamp)
b) LEVEL OF ENTRY		
Year of Study	Semester	Date
2. STUDENT'S CONFIRMA	TION	
Signature	Date	
3. FINANCE DESK (Cash Of	ffice)	
Fees Payable (Kshs)		
Amount Paid (Kshs)		
Balance (Kshs)		
Officer's Name	Sign	Date

OFFICER'S NAME	SIGNATURE	DA	ГЕ
GISTRAR'S OFFICE (Admission	Desk)		
I confirm that the student ha	as met all the required	d admission pro	ocedures.
Temporary ID Issued			
Signed Nominal Roll			
Admission Officer			
COMMODATION DESK (Option  Accommodation is subject to availa		ved on first come f	irst served basis.
Is accommodation available?	Yes	No	
Room allocated			
Accommodation Officer			
	Signature		Date
Accommodation Officer	_		Date

TUM is ISO 9001:2015 Certified

 ${\bf application\ form.}$