

**OFFICE OF THE PRIME MINISTER  
MINISTRY OF STATE FOR PUBLIC SERVICE**

**Application form for local in-service courses at the Kenya School of Government Campuses: -Mombasa, Matuga, Embu and Baringo**

**1.0 General Guidelines**

- i. Please note that certified copies of relevant academic and professional certificates must be attached on this application form
- ii. Where more space is required for additional information, separate sheets may be attached
- iii. Applications should be in duplicate. One copy should be retained by the applicant's Ministry/ Department, while the other should be forwarded to the Campus at which the course applied for is held
- iv. Application deadlines, schedules and procedures should be strictly observed
- v. Any false information shall lead to disqualification
- vi. Incomplete application shall not be processed
- vii. Information should be printed or written in block letters
- viii. Applicants should apply for only one course in any of the Campus. Those who apply for more than one course will be disqualified

**2.0 Proposed Course**

Name of the Course applied for .....

.....

Campus: .....

Course Dates: .....

KASNEB Number (for Accounts Courses only)

.....

Highest Level of education so far attained .....

.....

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**3.0 Personal Information (fill in all information as required)**

Name of applicant.....  
(Surname First) (Other Names)

Employment/Personal File Number .....

ID. No. .... Sex .....

Date of Birth ..... District .....

Name of the Ministry/Department/Local Authority/Parastatal  
.....  
.....

Department/Division .....

Duty Station .....

Office Address .....

Office Tel. No. .... Ext. ....

Email /Fax .....

Personal cell phone No.....

Name and address of person to be contacted in case of emergency  
.....

P.O Box ..... E-mail /Fax. ....

Tel. No..... Relationship to you .....

#### 4.0 Education Background

Please begin with the most recent institution attended:

Institution	Address	Year		Qualification		Area of specialization (if any)	Result/Grade Obtained
		From	To	Academic	Professional		

(Attach certified copies of certificates)

#### 5.0 Workshops/Seminars Attended

Workshop/Seminar	Date		Sponsoring Organization	Venue
	From	To		

(Attach certified copies of certificates)

#### 6.0 Employment Record

Date of first Appointment .....

Designation at Appointment.....

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Date of Present Appointment .....

Current Designation .....

Duties and responsibilities in present post

.....

.....

.....

Acting Appointment (if any).....w.e.f.....

**7.0 Last course attended .....**

Venue/Sponsor

.....

Duration of the course ..... Course dates .....

**8.0 Expected Professional Impact**

State how the course applied for will be useful to you and your present Employer

.....

.....

.....

**9.0 Declaration**

I declare that the information indicated by me in this application form is true, complete and correct to the best of my knowledge.

Signature .....

Date: .....

**10.0 Statement by Head of Department**

I recommend/do not recommend *(tick appropriately)*

..... to attend this course for the following reasons:

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.....  
 .....  
 Full Name .....  
 Designation .....  
 Signature .....  
 Official Stamp ..... Date: .....

Please state when the applicant last attended a course of training at a Kenya School of Government Campus\*

(Date.....Course.....Campus.....)

\*former GTIs

**11.0 Countersigned by Chairman/Secretary of the M/DTC\***

(i) Please indicate your decision regarding the nominee *(tick appropriately)*

Recommended	Not Recommended

Name..... Designation.....Signature.....

**\* The Ministry of State for Public Service will not consider any application not forwarded through the Ministerial/Departmental Training Committee (M/DTC).**

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