



Serial No.....

APPLICATION FOR ADMISSION INTO PWANI UNIVERSITY
POSTGRADUATE PROGRAMMES

NOTES:

- (i) This form should be typed or completed in **BLOCK LETTERS**, and returned to:
The Dean, School of Graduate Studies, Pwani University College, P.O. Box 195 - 80108, Kilifi.
Email address dean-graduate@pwaniuniversity.ac.ke or admission-graduate@pwaniuniversity.ac.ke
- (ii) **Attach Copies of** (a) your current appointment letter (where applicable), (b) your professional and academic certificates and transcripts, (c) original receipt of payment for application form
(d) National Identity Card (copy).
- (iii) Applicants from East Africa to pay a sum of Kshs. 3,000/- and those from outside East Africa pay Kshs. 4,000/- as application fee through the Bank Account provided in the advertisement.
- (iv) Attach **four** standard passport size photographs.

SECTION A

1) Name.....
(Surname) (Other names in full)

2) Contact Address.....

3) Permanent Address.....

Telephone No: Mobile No:

Email

Nearest Town: County.....

4) **Date of Birth:** Day..... Month..... Year.....

5) **Nationality:**

6) **Identification Details:** ID Card No..... Passport No.....

7) **Gender:** Male ☐ Female ☐

8) **Marital Status:** Single ☐ Married ☐ Other (specify).....

9) Do you have any special need(s)? Yes ☐ No ☐

If so indicate nature of need(s)

SECTION B

10. Institutions attended and Qualifications obtained starting with the latest.

QUALIFICATIONS	SCHOOL/COLLEGE/UNIVERSITY ATTENDED	YEAR OF COMPLETION	GRADES OBTAINED & CLASSIFICATION
(i) Academic			
(ii) Professional			

11. Work/Research experience (where applicable)

OCCUPATION	EMPLOYER	WORK STATION	DURATION

SECTION C

12. a) Specify degree applied for (e.g. PGD, Masters, PhD)

(i) Degree applied for

ii) Area of Study

(ii) Department

(b) Mode of study (Tick as appropriate)

i Full Time (Weekdays) ☐

ii Full Time (Evening & Weekends) ☐

iii Part Time ☐

iii. Institution-Based ☐

13 **Method of study and Examination:**

(a) Select how you intend to pursue your studies from one of the following methods:

(i) Coursework, examination and thesis ☐

(ii) Coursework, Examination and Project ☐

(iii) Thesis only ☐

(b) Proposed date for commencement of study.....

(c) Institution where research work is to be done if not at the University-----

14. How will you finance your studies?

15. Name two persons to act as your referees. They should be able to report on your potential to pursue graduate studies in your chosen area of study. At least one referee should have been your lecturer in degree courses.

Name: -----

Address: -----

Name: -----

Address: -----

SECTION D

DECLARATION BY THE APPLICANT

I hereby declare that to the best of my knowledge that the information I have provided is correct.

Name: **Signature:** **Date:**

SECTION E

16. Departmental Graduate Studies Committee (DGSC)

	Guiding Criteria	Yes/No
1	Meets academic entry requirements of programme applied for	
2	Has relevant research	
3	Has relevant work experience	
4	Referees' reports attest candidate's ability/suitability	
5	Department has capacity to supervise proposed area of study	
6	Proposed supervisors: Main Supervisor..... Other(s).....	

Recommendation by DGSC Admit ☐ Do Not Admit ☐ Defer ☐

Reasons for deferment: (e.g. incomplete Information, etc)
.....

Chairman (DGSC) Name: **Signature:**..... **Date:**.....

SECTION F

17. School Graduate Studies Committee (SGSC)

Admit ☐

Reject ☐

For Reject (state if any follow-up action).....

Dean of the School

Signature:..... **Date:**.....

18. Board of Graduate Studies (BGS)

Approved for Admission ☐

Not Approved for Admission ☐

Dean, School of Graduate Studies

Signature:..... **Date:**.....