



FORM ADM/2

EAST AFRICAN SCHOOL OF AVIATION
OFFICE OF THE REGISTRAR (ACADEMICS)

STUDENT'S PERSONAL DETAILS
(To be completed by the student)

AFFIX PASPORT SIZE PHOTO HERE

Information required in this form is intended to help the office of the registrar (Academic) and Dean of Students understand the student better. It will be used for the purpose of improving the student welfare while at school.

1. FULL Name: _____
(SURNAME) (OTHER NAMES)
2. School Admission Number _____
3. Date of Birth _____ Place of Birth _____
4. Sex: Male/Female
5. Religion _____ ID/PP No. _____
6. Nationality _____ Country _____
7. Family Home Address _____

8. Sub-Location _____ Name of Sub Chief _____

9. Location _____ Name of Chief _____

10. County _____

11. Postal contact Address _____

Tel: Number _____

12. (a) Marital Status: Single/Married

(b) Name and Address of Spouse (if Married)

13. Name Mother _____ Alive/Deceased _____

14. Full address of Mother _____

(a) Occupation of Mother _____ Tel _____ Fax _____

15. Name of Father _____ Alive/Deceased _____

(a) Occupation of Father _____ Tel _____

Name and Address of Guardian _____

16. Name of Guardian _____

(a) Occupation of Guardian _____ Tel _____

17. Name(s) of brother(s) , sister(s) and dates of birth

Name

Date of Birth

18. Give names and address of three persons who can be contacted in case of an emergency

Name	Relationship	Contact
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

19. Name and address of secondary school (s) attended and dates.

20. K.C.S.E or Equivalent Results

<u>Subject</u>	<u>Grade</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

20. Any other institution attended, qualification and dates of completion

<u>Institution</u>	<u>Qualification</u>	<u>Date of completion</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

21. Which games or sports are you interested in?

Soccer _____ Hockey _____ Basketball _____ Netball _____ Lawn Tennis _____
Athletics _____ Swimming _____ Darts _____ Squash _____
Volley ball _____ Badminton _____ Rugby _____ Table tennis _____
Martial Arts _____

If other specify

22. Did you represent your school in game/sports? If you did, in what capacity?

23. Which clubs, societies or Hobbies are you interested in?

Please give details or your participation.

24. Which Cubs/ Societies/ Hobbies would you like to participate in East African School of Aviation?

25. Please give any information you think is useful for you to communicate in this School in order to improve your welfare as a student.

26. Give any other information that might assist the school to know you better.

I certify that the information have provided is correct

Signature _____ Date _____