



EAST AFRICAN SCHOOL OF AVIATION

APPLICATION FOR ADMISSION

	SONAL DATA			
1.	Applicant's Name	Surname,	Middle Name,	First Name
2.	Contact (Postal Ad	ddress):		
3.	Phone Contact:		Email:	
4.	Date of Birth			
5.	Nationality:		National ID/Passport N	lo:
6.	Gender :	Male	Female	
7.	Marital Status :	Married	Single	
II. DE	GREE/ DIPLOMA	A / CERTIFICATE AI	PLIED FOR:	
III. A	cademic Year			
		(e	.g. 2022/2023)	
IV. M	AIN CAMPUS		WILSO	N AIRPORT CAMPUS
V. MO	DE OF STUDY: Fu	ull day	Evening & Weekends	

VI. RECORD OF SECONDARY EDUCATION

(Attach copies of Result Slips and Certificate)

SCHOOL	FROM (YEAR)	TO (YEAR)	CERTIFICATE	GRADE OBTAINED

VI. RECORD OF POST SECONDARY EDUCATION

(Attach Copies of Result Slips and Certificates)

INSTITUTION / POLY/ UNIVERSITY	FROM	то	AREA OF STUDY	QUALIFICATIONS ATTAINED

VII. WORK / PROFESSIONAL EXPERIENCE

JOB	EMPLOYER	FROM	ТО

VIII. FINANCES

Please indicate how you intend to finance your study

Private finance sources Company Sponsorship Other financial sources
If sponsored, write the name and contact of sponsor
Signature of Applicant: Date
FOR OFFICIAL USE ONLY Admission Recommended: Admission not recommended:
Programme Applied for:
Comment:
Signature: Chair-Admissions Committee Date

Application forms to be returned to the undersigned upon an application fee payment **Ksh.1, 000.00** through the EASA portal <u>http://ectizen.easa.ac.ke</u>

Please be advised that no payment should be made outside the **E- Citizen Platform**. Any payments made otherwise will not be honored by the School and will be considered Nul and Void.