

22.11.2018

FORM ONE 2019 APPLICATION FORM

INDEX No:	GENDER:
NAME:	DATE OF BIRTH:
K.C.P.E. MARK:	K.C.P.E. YEAR:
PRIMARY SCHOOL ATTENDED:	
SCHOOL COUNTY	
DISTRICT:	
PARENT'S/GUARDIAN'S NAME:	
CELL PHONE No:	

Note: Please attach copies of KCPE Result Slip and Birth Certificate.