

KIHARU TECHNICAL AND VOCATIONAL COLLEGE

PO BOX 29-10200 MURANG'A TEL 0720-657-630

AFFIX YOUR
DIGITAL
PASSPORT

DATE:

PERSONAL DATA FORM

Please complete the following information accurately

Name:.....

ID NO :

Address:

place of birth

KCPE Index Number

KCSE Index Number

Current place of Residence

FATHERS NAME

ID NO :

Profession:.....

Mobile No

Contact address:.....

ID NO

MOTHERS Name:.....

Religion:

Profession:.....

Mobile No

Contact address:.....

Sub-location

Home County :

Ward

Constituency:

sub - location

Location :

Address

Chiefs name :

address

Telephone number

Sub - chief name:

Telephone number:

NEXT OF KIN

Name :

Relationship with next of kin

Address :

TEL/MOBILE

Profession :

DANIEL K. WAHUNGU
PRINCIPAL/BOG SECRETARY

**KIHARU TECHNICAL AND
VOCATIONAL COLLEGE
PRINCIPAL**
DATE.....
**P. O. Box 29-10200,
MURANG'A**