



Kenya Institute of Project Management

'Your roadmap to success'

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COURSE APPLICATION FORM

NAME: _____

AGE: _____ SEX: _____

NATIONALITY: _____ ID NO. : / PASSPORT NO.: _____

MARITAL STATUS: _____ RELIGION: _____

TEL: _____ FAX: _____

POSTAL ADDRESS: _____

E-MAIL ADDRESS: _____

NEXT OF KIN: _____

RELATION _____ TEL: _____

COURSE APPLIED FOR: _____

MODE OF STUDY

- FULLTIME CLASS
- PART TIME (EVENING / SATURDAY CLASS)
- DISTANT LEARNING (**tick one**)

MODE OF PAYMENT: CASH DEPOSIT BANKERS CHEQUE (**tick one**)

SIGNATURE: _____ DATE: _____

Attach:

Application Fee of Ksh. 2,000 (Non Refundable)

Relevant Certificates

Copy of ID or Passport

A detailed CV

2 Passport size photograph

Send this form to:

The Training Coordinator,

Kenya Institute of Project Management,

P.O. Box 11489 - 00100 (GPO),

Nairobi, Kenya.

E-mail: kipmtraining@kipm.co.ke / kipmtraining@gmail.com