

Full Name:

Address:

.....

Email Address:

Phone Number:

Date:

The Registrar,
Livestock Training Institute- Wajir
P.O. Box 339- 70200,
Wajir, Kenya.

Dear Sir/Madam,

RE: APPLICATION FOR ADMISSION INTO LIVESTOCK TRAINING INSTITUTE

I am writing to express my keen interest in enrolling at **Livestock Training Institute- Wajir** for a course in I have successfully completed my *(highest level of education)* at [School /Institution Name] and attained grade.

Enclosed with this letter are my [] **Filled application form**, [] **academic certificates** [] **KCSE certificate**, [] **high school leaving certificate**, [] **National Identity card** [] **Passport photo**

I look forward to your positive response and the possibility of joining Livestock Training Institute- Wajir. Thank you for your time and consideration.

Yours Sincerely,

(Sign)



Ministry of Agriculture & Livestock Development

STATE DEPARTMENT FOR LIVESTOCK DEVELOPMENT

LIVESTOCK TRAINING INSTITUTE- WAJIR

P.O BOX 339 – 70200- WAJIR.

www.ltiwajir.go.ke

APPLICATION FORM FOR DIPLOMA/CERTIFICATE PROGRAMMES

NB: To be completed in **BLOCK LETTERS** and returned to the **Registrar**.

Course Applying for: (Select one)

- ☐ Certificate in Animal Health & Range Management
- ☐ Diploma in Animal Health & Range Management
- ☐ Upgrading Course to Diploma in Animal Health and production

SECTION A: APPLICANT DETAILS

1. Full Name:
- | Surname | Middle | First |
|---|--------------------------------------|---------------------------------|
| 2. Date of birth..... | Gender Male <input type="checkbox"/> | Female <input type="checkbox"/> |
| 3. Marital Status (<i>Tick appropriately</i>) Married <input type="checkbox"/> | Not Married <input type="checkbox"/> | |
| 5. Nationality..... | ID. No/PP No:..... | |
| 6. Telephone No: | Mobile No..... | |
| 7. Email..... | Religion | |
| 8. Current address: | County: | |
| 9. Employer (<i>If applicable</i>) | | |
| 10. Permanent Address {if different from the current address} | | |

SECTION B: NEXT OF KIN DETAILS

10. Name of next of kin.....

Relationship (*e.g. parent sibling, spouse, guardian*)

Mobile No of next of kin.....

11. a) Name of the parent/guardian

b) Contact of the parent/guardian

SECTION C: EDUCATIONAL BACKGROUND

12. Schools/Institutions attended, years attended and qualifications obtained (**attach copies of qualification(s) obtained**)

S/NO	SCHOOL/COLLEGE ATTENDED	DATE		QUALIFICATION ATTAINED	GRADE
		FROM	TO		
1.					
2.					
3.					
4.					
5.					
6.					

SECTION D: DECLARATION

I declare that the information given in this form is correct. I understand that providing false information or forged documents will lead to my disqualification and prosecution in accordance with laws of Kenya.

Signature **Date:**

SECTION E: APPLICATION FEE PAYMENT

- 13.** A non-refundable fee of Ksh. 1,000 should be deposited into the institute's KCB Account number **1147627495 (Account Name: State Department for Livestock (LTI-WAJIR))** before submitting your documents. Ensure you attach the banking slip as proof of payment.
- 14.** You can also pay application fee through MPESA Paybill Number **522522** Account No. **1147627495**. Write the MPESA code Send the MPESA code to **+254(0) 701 007 479 or +254 (0) 705 613 780**

SECTION F: FOR OFFICIAL USE ONLY

Date Received...../...../20.....

All documents have been attached []

Comments:

Recommendation:

Assessing officer: Sign:

APPROVAL:

REGISTRAR: SignatureDate

All correspondences / enquires should be addressed to:

**REGISTRAR,
LIVESTOCK TRAINING INSTITUTE- WAJIR
P.O BOX 339 – 70200- WAJIR.**

WWW.LTIWAJIR.GO.KE

Email: admissions@ltiwajir.go.ke or registrarlti@gmail.com

Contact: 254 701 007 479 or +254 705 613 780