

***Application Form for Recognition of Qualifications***

1. **Please Fill in your Personal Details**

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| ID No: |  | Passport No: |  |
|  | *(Applicable for foreign nationals only)* |
| Title | Dr | Mr. | Mrs. | Ms. |  |
| Surname: | *(in block letters)* |
| Other Name/s: | *(in block letters)* |
| Maiden Name*(if applicable)* | *(in block letters)* |
| Residential Address: | *(in block letters)* |
| Correspondence Address: | *in block letters)* |
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| Present Occupation and Department |

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| Nationality: | Date of Birth: |
| Phone No.- | Office: | Home : | Mobile : | Fax: |
| Email address : |

**Preferred mode of contact: Phone: Letter: Email:**  |
| Please indicate preferred languageEnglish French Kiswahili:  |

1. Please indicate the sector (e.g. Tourism , Construction, printing, plumbing) in which you wish to apply for RPL:
2. Please indicate the numbers of years of experience in the specific sector:
3. State the qualification against which you wish to claim your recognition of prior learning: