



**MINISTRY OF EDUCATION
STATE DEPARTMENT OF VOCATIONAL AND TECHNICAL TRAINING
GATANGA TECHNICAL AND VOCATIONAL COLLEGE
P.O BOX 6232-01000 THIKA,
TEL: 0713 477 791/ 0733 991 314**



EMAIL: gत्वgatanga@gmail.com, info@gatangatvc.ac.ke WEB: www.gatangatvc.ac.ke

APPLICATION FORM

Date of Application

A. PERSONAL DETAILS

Name (in full)

Address I.D. NO.

Mobile phone no. E mail..... Date of birth.....

B. QUALIFICATIONS

KCSE mean grade.....Mathematics..... English..... Physics.....

Biology/Chemistry.....

C. COURSE APPLIED FOR:.....

Next of kin.....

Address..... phone no.Email.....

Guardian.....

Address..... phone.....Email.....

Signature of applicant.....

D. MODE OF DELIVERY

Applications accompanied by photocopies of National I.D card or Birth Certificate, KCPE Result Slip, KCSE/or other Result Slips and School Leaving Certificate should be sent through post or hand delivered to:

The Principal through the above address:

GATANGA TECHNICAL AND VOCATIONAL COLLEGE

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THIKA