Kamagambo University

A Seventh-day Adventist Institution of Higher Learning

APPLICATION FORM

Phone: **+254 720729462/+254 711693439** Email: **admissions@kamagambo.ac.ke**
Website: **www.kamagambo.ac.ke** P.O. Box 591-40200 Kisii

Required Documents for Admissions to be sent as one PDF file to admissions@kamagambo.ac.ke

* Filled Application Form & passport size photo
* Copy of KCSE Certificate/Results Slip
* Copy of Certificate/Diploma/undergraduate (for up-graders)
* Copy of Birth Certificate
* Copy of School Leaving Certificate
* Copy of the National ID/Passport
* Transaction message/payment receipt for application fee
* International students will be required to provide the equivalent of these required documents.

Attach Recent Passport Photo

First Name: _____ Second Name(s): _____ Last Name: _____
(Note: ***use the same names that consistently appear in all your official documents.***)

Phone No: _____ Email: _____ Gender: Male ☐ Female ☐
Date of Birth (dd/mm/yyyy): ____/____/____ Marital Status: Single ☐ Married ☐ Nationality: _____

County: _____ Location: _____ Sub-location: _____
Village: _____ Passport/National ID: _____

Language of instruction at secondary level or High school: _____

Other language (s):_____ Religion: _____ Denomination: _____

State the name of the place where you worship (Indicate Religion / Denomination): _____

Semester for which you are applying: 1st Semester (**August**) ☐ 2nd Semester (**January**) ☐ Inter-semester (**May**) ☐ **Year**: _____

Level of Desired program: Other ☐ Undergraduate ☐ Diploma ☐ Certificate ☐

Specific area of study: _____ Teaching Subjects: 1_____ 2 _____

(NOTE: ***If your area of study is Education, write the two teaching subjects of your choice /Other students to indicate their degree***)

Mode of Study: Full-time (Face-to-face) ☐ In-service ☐ Blended ☐

While at Kamagambo, where do you plan to stay? University-arranged accommodation ☐ Faculty/Staff home ☐ Off-Campus ☐

How did you find out about Kamagambo? Through(Tick the applicable): Kamagambo University Student/Worker (Name) _____
Career Exhibition ☐ Family Member ☐ Social Media (Facebook, TikTok...) ☐ Search (Google) ☐ Television ☐
Newspaper ☐ KUCCPS Placement ☐ Other_____

Family Information:

Father's Name: _____ Phone No(s): _____ Email: _____
Religion: _____ Denomination: _____

Mother's Name: _____ Phone No(s):_____ Email:_____
Religion:_____ Denomination: _____

Legal Guardian/Sponsor's Name : _____
Phone No(s):_____ Email:_____

Is either of your parents employed by the Seventh-day Adventist Church? ☐ Yes ☐ No
If yes, name the employer_____

if the applicant is a minor the following person should give consent:

Tick the applicable: **Parent** ☐ **Guardian** ☐ **Sponsor**

☐ I consent to the applicant's enrollment at Kamagambo University, and affirm my support for this student to join Kamagambo University and that this student will follow all the rules and regulations given by the university authorities in the process of learning

Name: _____ Signature _____ Date _____

Statement of Financial Responsibility by: ☐ **Parent** ☐ **Guardian** ☐ **Sponsor** ☐ **Other** _____

☐ I fully accept responsibility for the payment of the applicant's complete tuition and related fees at Kamagambo University. I hereby undertake to ensure that all payments are made in accordance with the University's official timelines and prescribed procedures.

Name: _____ Signature _____ Date _____

Applicant's Commitment:

☐ I hereby affirm that the information provided in this application is accurate, complete, and truthful to the best of my knowledge. Upon admission to Kamagambo University, I solemnly commit to upholding its regulations, standards, and expectations with integrity in both academic and spiritual life. I will adhere to the university's principles outlined in the Student Handbook and Official Communications, conducting myself in a manner consistent with the university's Seventh-day Adventist heritage. I declare myself to the growth of wisdom, character, and service through a Christ-centered education.

☐ By submitting this application for admission to Kamagambo University, I hereby acknowledge and consent to the collection, processing, storage, and sharing of my personal data by the University in accordance with the Kenya Data Protection Act, 2019; and Data Protection Policy of Kamagambo University

Name: Signature _____ Date _____

if the applicant is a minor the following person should give consent:

☐ Parent ☐ Guardian ☐ Sponsor ☐ Other _____

I hereby give consent for the collection, processing, storage, and sharing of the personal data of the minor named above by the University, authorized government agencies and regulatory bodies, in full compliance with the provisions of the **Kenya Data Protection Act (2019)**, **the Office of the Data Protection Commissioner's Guidance Note on Processing Children's Data (2025)** and **Data Protection Policy of the Kamagambo University**

Name: _____ Signature _____ Date _____

Application Fee (Non-refundable)

Amount in Kenya Shillings: ● Postgraduate 2000(20USD) ● 1500(15USD) Undergraduate ● 1000(10USD) for Diploma/Certificate

● 500(5USD) other (short courses, seminars,etc)

Ecobank
The Pan African Bank

Payment Details:
Bank: ECO-BANK KENYA LIMITED
Branch: Kisii
Account number: 6622010362
Acc Name: Kamagambo University

LIPA NA MPESA
Mpesa paybill number: 4331579
Account number: APPLICATION FEE
Acc Name: Kamagambo University

KCB BANK | Makin Differ

KCB BANK, BRANCH: RONGO
ACCOUNT NO:1357835647
ACCOUNT NAME: KAMAGAMBO UNIVERSITY

LIPA NA MPESA

PAYBILL:522533
ACCOUNT NO: 8157642
ACCOUNT NAME: KAMAGAMBO UNIVERSITY