

## **GREAT LAKES UNIVERSITY OF KISUMU (GLUK)**

P.O. Box 2224-40100, Kisumu Website: www.gluk.ac.ke E-mail: admissions@gluk.ac.ke /postgraduate@gluk.ac.ke

Mobile No.0736-550-505

## APPLICATION FOR ADMISSION TO POSTGRADUATE STUDIES

Affix 2 recent coloured passport size photos

Date of receipt of Application						
SECTION A: PERSONAL PARTICULARS Surname/Family Name: Other Names: Othe						
County: Email:						
Current Address:						
Permanent Home address (if different address)						
SECTION B: PROGRAMME PARTICULARS State the level of programme that you wish to be considered for:						
Postgraduate Diploma Masters Doctorate						
Name of degree: Field of Study:						
Faculty: Department:						
If a doctoral applicant, provide and attach a concept paper						
If a doctoral applicant, indicate if Master's degree was by:  Coursework and thesis course work only						
Give the title of your master's degree/master's Project						
Proposed date of commencement: Expected date of completion:						
Preferred Mode of Study (Tick as appropriate)						
Fulltime Part-time eLearning						

	CATION BACKGR chool(s) Attended: Examining Bod e.g. KNEC			anscripts) Qualifications Obtained
				ic transcripts showing the grade
University	Dates attended	Field of study (e.g. History)	<b>Degree award</b> (e.g. B.Sc. Uppe	
b) Second Degree University attend	e: led Dates attende	ed Field of study (e.g.Physics)	Degree awar (e.g. B.Sc. Upp	er Div.)
(List of publication  SECTION D: Emp Position	oloyment /Work Ex Plac	) , dissertation, thesi control (Attach e of Employment	a copy of the Cu	parate sheet if necessary.  Urriculum Vitae)  Employment(From to )
•••••				
What languages d	o you speak?			
	e must have taugh			Level
Address		Telephone:	Em	nail:
b. Name of Refere	ee:	De	signation:	
Address		Telephone:	Fm	ail·

How did you come to know about Great Lakes University of Kisumu? (Tick as many options as are applicable)
University website [ ] Newspaper [ ] TV/Radio [ ] Internet [ ] Brochures [ ] Family/Friends [ ] University Staff [ ] Exhibitions [ ] Career Visits/Talks [ ] Current Students/Alumni [ ] Others (Specify)
<ul> <li>APPLICATION CHECKLIST: <ol> <li>Attached original application fee receipt.</li> <li>Send reference letters to the Director, Postgraduate Programmes</li> <li>Attached photocopies of both Academic and Professional certificates and transcripts.</li> <li>For doctoral applicants, attach concept paper</li> <li>Application processing fees of Ksh. 2000 (60 USD).</li> </ol> </li> </ul>
<b>SECTION F: PERSONAL STATEMENT</b> I certify that the information given on this form is correct to the best of my knowledge. I acknowledge that providing incorrect information or withholding relevant information may result in the University withdrawing any offer of a place.
Signature of the applicant: Date:
SECTION G: FOR OFFICIAL USE ONLY Recommendation of the Department. a. Forwarded to the Department of
b. Recommendation of the Department: Accepted Rejected C. Comments.
Head of Department's Signature: Date:  Recommendations of the Board of Postgraduate Programmes
a. Forwarded to the Board: Date
b. Recommendation of the Board: Accepted Rejected c. Comments:

**NOTE:** The University reserves the right to request and obtain further information from any educational institution or employer which may be required to confirm or clarify your suitability for the course applied for.

Director's Signature: Date: