

FRONTLEARN INSTITUTE

APPLICATION FORM

READ THE APPLICATION INSTRUCTIONS BEFORE COMPLETING THIS FORM

COMPLETE ALL APPROPRIATE SECTIONS IN CAPITAL/BLOCK LETTERS AND RETURN WITH YOUR SUPPORTING DOCUMENTS

T0: Frontlearn Institute Admissions Office P.O. Box 76714 -00620 NAIROBI, KENYA

Tel: 0721 930920 | 0718930920 E-mail: admissions@frontlearn.co.ke www.frontlearn.co.ke

Have you previously applied to Frontlearn Institute? \Box Yes

AFFIX RECENT PASSPORT PHOTOGRAPH

Applicant Information					
Name:Firs	st	Mi	ddle		Last
Gender: □ Male □ Female					
National ID Number: Passport Number: E-mail Address:					
Address:	P.O. Box	City/T	'own	Zip Code	
		Enrolmer	nt Information		
Please tick y	our preferred ser	nester of enrolment			
□ January	\Box April	\square July	□ October	Year	
Level: Certificate Diploma Course:					

 \square No

Parent/Guardian Information

Name:			
Relationship:			
E-mail Address:			
Address:P.O. Box	City/Town	7	Zip Code
Telephone Number:	Alternative Telephone Number:		
	Educatio	on	
Please list all schools and colleges Name of Institution	cattended in the section Country	below: Years Attended	Name of Certificate or
	•	From To	Diploma awarded
	Sponsor's D	etails	
Name:			
E-mail Address:			
Address:P.O. Box	City/Town	7	Zip Code
Telenhone Number:	Alt	'elenhone Number:	

Statistical Information

This information will be used for statistical purposes only and will in no way affect the admission decision. Completion of this section is not mandatory, however, the data collected will help the Institute determine need in planning. Your providing this information is appreciated.

Disabilities	:			
\square None	\square Hearing	\square Mobility	□ Sight	
College Into	erests			
Please list tl	ne first there colle	ges/universities int	to which you have applied	
1		2	3	
How did yo	u learn about Fr	ontlearn Institute	?	
□ College/H	igh School Fair	□ Newspaper	□ Frontlearn Website	□ Radio □ TV
□ Posters Ex	khibition 🗆 Pai	rent \square Relative	□ Frontlearn student	☐ Frontlearn Staff
☐ Frontlearr	n Alumni 🗆 Front	learn Marketing Re	presentative \square Facebook	□ Twitter
□ Instagram	□ Other	(Please specify)		
Are you em	ployed?			
\square YES	□ NO			
If employed	please state:			
Company Nai	me	Po	sition (Title)	Duration
		De	eclaration	
and hereby gi application.	ve my permission	to the Admissions O	ffice to obtain any verification	lete to the best of my knowledge, deemed necessary to process my
that such trar returned to m I will include	nscripts become thee.	ne property of the co quired in the applic	ollege and will neither be forw	equested in the instructions, and warded to another institution nor acknowledge that completing an
	· ·		Date	
· —				

Application Checklist

Complete and signed application form (please observe deadlines below)
Copy of all transcripts, diplomas, & certificates

☐ One (1) recent passport size (write your name on reverse side)

☐ Copy of National Identity Card or Birth Certificate

☐ School Leaving Certificate

Have you provided the following?

ONLY COMPLETE APPLICATIONS WILL BE PROCESSED.

DEADLINES MUST BE OBSERVED.

Application deadlines for Frontlearn Institute are as follows:

Semester	Deadline
January	November 30 th
April	February 28th
July	May 31st
October	August 31st

COMPLETE APPLICATIONS RECEIVED AFTER THE DEADLINE WILL BE PROCESSED FOR THE FOLLOWING SEMESTER.

FRONTLEARN INSTITUTE RESERVES THE RIGHT OF ADMISSION