#### MINISTRY EDUCATION

#### STATE DEPARTMENT FOR TECHNICAL, VOCATIONAL EDUCATION AND TRAINING

### **BUSHIANGALA TECHNICAL TRAINING INSTITUTE**

**Address:** P.O.BOX 2227 - 50100 KAKAWEGA. **Tel No:** 0702092440, 0792708482



E-MAIL: info@bushiangalatechnical\_,ac.ke WEBSITE: www.bushiangalatechnical.ac.ke

STUDENT INDEX NO: 37614301010/2022

NAME: IDEWA SHADRACK ESKETI

ADDRESS: -\_\_\_,

### **ADMISSION LETTER**

Dear: IDEWA SHADRACK ESKETI,

REF: CRAFT ADMISSIONS - 2023/2024 ACADEMIC YEAR

I am pleased to inform you that you have been offered a chance to pursue a Craft Course in **CERTIFICATE IN** 

**ELECTRICAL AND ELECTRONICS TECHNOLOGY** in the Department of **Electrical & Electronics** 

Engineering.....

This Craft course will be offered by course work, examinations and Industrial Attachment.

#### (Students can change a course within two weeks after admission)

You should report on 04/09/2023 and in no case later than 15/09/2023 during working hours (8:00 am - 4:30 p.m.) from Monday to Friday.

Following your placement in this institution, you are eligible for a Government Scholarship, Loan and Bursary to assist with your educational expenses. If you need Government financial support, you MUST make an application for consideration through the official website <a href="www.hef.co.ke">www.hef.co.ke</a>. In case the Government Scholarship, Loan and Bursary do not cover the entire cost of your programme, the deficit will be met by your parent /guardian.

Information on fees, other requirements and Institutional Regulations are enclosed for your perusal. You are advised to pay full fees on admission. Total fee charged is Kshs. 67,189.00 (*Sixty- Seven Thousand, One Hundred and Eighty-Nine Only*) per year. All the fees must be deposited in the **College Account** i.e. **1102702188-K.C.B Kakamega Branch** or can be paid by **Bankers Cheque** but **NOT** in **Cash.** 

Please complete the Personal details form, Medical form and application form. Note that once admitted fees shall not be refunded should you choose to discontinue with the course. **Bushiangala Technical Training Institute** is in Kakamega South Sub-County (*Ikolomani Constituency*).

The Institute has limited accommodation chances on First Come – First Served basis upon payment of accommodation fees of **Kshs. 3000.00** to the college account.

We look forward to assisting you attaining your Professional growth.

Yours faithfully,

BUSHIANGALA TECHNICAL TRAINING INSTITUTE

**JANET OTUYA** 

PRINCIPAL/SECRETARY B.O.G

retwarma.

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#### **SEPTEMBER 2023 INTAKE**

#### Requirements for (TVET GoK) Scholarship, Loan & Bursary application

- 1. A valid email address
- 2. Valid telephone number (must be registered in your name to apply for a loan)
- 3. KCPE and KCSE index numbers and year of examination
- 4. Passport size photo
- 5. Copy of your National ID (for loan application)
- 6. College/University admission letter
- 7. Your parents' registered telephone number
- 8. Your parents' national ID number
- 9. Death certificate if any of your parent is deceased.
- 10. Your birth certificate.
- 11. Two guarantors' (Can be your parents) ID numbers and registered telephone numbers (for loan application)
- 12. Copy of the sponsorship letter if you were sponsored in Secondary school.

#### **HOW TO APPLY FOR SCHOLARSHIP**

- 1. Visit the following website link www.hef.co.ke
- 2. Click on **Apply Now** on 2023 2024 New Funding Application option
- 3. Follow the following steps to complete the online application



#### **NEW FINANCING MODEL**

	Categorization					
	Less Needy	Needy	Extremely Needy	Vulnerable		
Tuition Scholarships %	32%	50%	70%	80%		
Tuition Loan %	48%	30%	30%	20% 0%		
Household	20%	20%	ο%			
Upkeep Loan Amount	Kshs. 13,600	Kshs. 13,600	Kshs. 13,600	Kshs. 13,600		

#### **OTHER REQUIREMENTS**

#### 1. BOARDING

1 Mattress, 1 Blanket, a pair of sheets, towel, basin/pail and enough decent clothes, enough personal effects, games kit.,

#### **REGISTRAR**

### Two photocopies of each of the following:

- a) K.C.P.E Academic Certificate or result slip
- b) K.C.S.E Academic Certificate or result slip.
- c) Leaving Certificate
- d) Identity Card for the student
- e) Identity Card for the parent/guardian
- f) Four current passport size photographs
- g) Birth certificate
- h) Original certificates for verification
- i) Two Spring files plastic
- j) 10 A4 exercise books

# 2. TECHNICAL DRAWING REQUIREMENTS (ALL STUDENTS IN ELECTRICAL, MECHANICAL &BUILDING DEPARTMENTS)

- a) 30 cm ruler (Plastic)
- b) Drawing Set Square 30/60 set-square (10 cm)
- c) Drawing Sets
- d) A pair of Compasses (20 cm)
- e) A T/Square
- f) A pair of Drawing Clips
- g) Eraser and Pencils (2H, 4H, HB)
- h) Overall/Dust coat
- i) Masking Tape
- j) Scientific Calculator (fx 82Ex)
- k) Protective Shoes

### 3. TEXTILES AND CLOTHING

- a) Tape measure
- b) Scissors
- c) French Curves
- d) Tracing wheel
- e) Bobbin and Bobbin cases
- f) Pins

#### 4. HAIR DRESSING

- a) 4 Large salon towels
- b) Scissors
- c) 2 Apron (Royal blue)
- d) 3 wooden blow-drying combs (small, medium, large)
- e) Weaving needles
- f) Wooden plaiting comb/Afro comb
- g) Black closed flat shoes

#### 5. SCIENCE LAB TECHNOLOGY/APPLIED BIOLOGY

- a) Lab coat/dust coat(white)
- b) Scientific calculator Casio fx 82 ms
- c) Biology (Functional approach) by M.B.V ROBERTS for Diploma Course
- d) PHYSICS by Abbot for Certificate course for S.L.T Classes
- e) CHEMISTRY by Lambert for Certificates course for S.L.T Classes
- f) Introduction to Biology by Mekeen for S.L.T Classes

#### **6. COMPUTER DEPARTMENT**

- a) Flash Disk 2GB
- b) White lab. Coat
- c) Laptop

#### 7. SECRETARIAL DEPARTMENT

- a) Short Hand Dictionary
- b) 2<sup>nd</sup> Anniversary Shorthand Book by Pitman
- c) English Dictionary Edition 12th -oxford
- d) Printing papers Enough Reams for The Whole Term
- e) Rewritable CD & HB pencils

#### **8.REQUIREMENTS FOOD AND BEVERAGE**

- 1. Scarf
- 2. Chefs Jacket 1pc
- 3. Apron White 1pc
- 4. Over Gloves 1pc
- 5. Kitchen Cloth 3pc
- 6. Hard Towel 1pc
- 7. Surface Cloth 1pc
- 8. Black Trousers /Skirts 1pc
- 9. White Shirts (Long Sleeved) 1pc
- 10. Butchers Knife 1pc
- 11. Vegetable Knife 1pc

- 12. Palate Knife 1pc
- 13. Fruit Knife 1pc
- 14. Kitchen Knife 1pc
- 15. Opener/Corks Screw 1pc
- 16. Glass Cloth 1pc
- 17. Waiters Cloth 1pc
- 18. Work Surface Cloth 1pc
- 19. Order Pad/Book 1pc
- 20. Dust Coat 1pc
- 21. Table Napkins
  White(21x21) 1pc

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## **APPLICATION FORM**

DATE OF APPLICATION:
NAME OF APPLICANT: (SURNAME FIRST):
POSTAL ADDRESS:
PHONE NUMBER:
DATE OF BIRTH: ID NO:
COUNTY: DISTRICT/SUB-COUNTY:
LOCATION: SUB LOCATION:
VILLAGE:
COURSE APPLIED FOR:
LEVEL OF COURSE: (ARTISAN, CERTIFICATE OR DIPLOMA):
LEVEL OF EDUCATION:
GRADE OBTAINED:
SIGNATURE:

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**SECTION I** 



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MOB NO .....

## APPLICANT'S PERSONAL DETAILS

# FULL NAME: GENDER: ...... AGE: ..... ID NO: ...... COUNTY......HOME DISTRICT: ...... CONSTITUENCY: ...... MAILING ADDRESS P.O. BOX ...... POSTAL CODE: ....LOCATION: ..... SUB- LOCATION: WARD/VILLAGE/ESTATE: ..... HIGHEST LEVEL OF EDUCATION/TRAINING: ..... GRADE OBTAINED: .....YEAR COMPLETED: ..... EXAM INDEX NO: ..... PREVIOUS INSTITUTIONS/SCHOOL: P.O. BOX ...... POSTAL CODE: ..... ANY DISABILITY: (YES/NO) ......IF YES: MILD/SEVERE: ..... SPECIFY: ..... **SECTION II** OCCUPATION: ......ANNUAL INCOME: ..... OTHER SOURCES OF INCOME: MOB.NO. IF FATHER IS ALIVE (YES/NO)...... (If No Attach Evidence of Death) OCCUPATION: ANNUAL INCOME: ..... OTHER SOURCES OF INCOME: ......MOB. NO. ..... IS MOTHER ALIVE (YES/NO).....(If No, Attach Evidence of Death)

OCCUPATION: .....ANNUAL INCOME: .....

### SIBLINGS IN SCHOOL/INSTITUTION

NAME	SCHOOL/INSTITUTIO N	CLASS/COURS E	AGE	ANNUAL FEES
SIBLINGS WORI	KING		l	
NAME/ INCOME	EMPI	LOYER AND ADD	RESS	
•				
•				
•				
•				
giving false informa	bove information is true to the best of attion will lead to automatic disqualifi			
NAME	SIGNATURE		Γ	OATE
SECTION III RECOMMENDATIO	<u>DNS</u>			
(i) AREA CHIEF/A	SSISTANT CHIEF			
I confirm/refute the applicant for the aw	e information given by the applicant and rard of bursary.	I recommend/do no	t recomn	nend the
NAME	MOBILE NUMBER	SIGN	, DATE A	AND STAME
I declare that the ab	ADER (ORDAINED PASTORS, BISHOF ove information is true/not true to the lation will lead to automatic disqualificativy.	oest of my knowledge	and I an	
NAME	MOBILE NUMBE	R SIG	N. DATE	AND STAM

# **BUSHIANGALA TECHNICAL TRAINING INSTITUTE**

# **MEDICAL EXAMINATION CERTIFICATE**

NA	ME:
CC	OURSE TO BE UNDERTAKEN:
1.	EYE AND VISION
	Unaided Left
	Unaided Right
	Colour Blindness
	Visual Field
2.	EAR, NOSE & THROAT
	Is Nasal breathing habitual
	Adenoid
	Hearing voice – Right /Left
3.	MOUTH AND TEETH
Tu	th special reference to any bercular Tendencies  SINAL COLUM
(b)	Urine Faeces
Bile Any	Splash Liver s and Varicose veins other weakness, defect or disease: e.g. Defects of speech, twitching or spasm, chorea or other nervous rders, Venereal diseases or Rheumatic Tendon.
Na	me of Hospital:
	me of Registered Medical Practioner:Signature:
A	ddress:Date/Stamp:

 $\underline{NOTE}$ : This form MUST be filled by a Registered Medical Practitioner and send directly to the Institute so as to be received before a student is admitted in the Institute.