



KENYA HIGHLANDS SEMINARY
a subsidiary of Kenya Highlands University
OFFICE OF THE PROVOST

AFFIX PASSPORT SIZE

2" x 2"

PHOTOGRAPH

HERE

Email: admissions@khs.ac.ke Website: www.khs.ac.ke Mobile/WhatsApp: 0757933160

APPLICATION FORM

APPLICATION GUIDELINES

- 1. APPLICATION DEADLINE 30 NOVEMBER 2024**
- This form should be **FILLED** and emailed to admissions@khs.ac.ke
- Email Attachments copies of:**
 - Your Identification Card
 - Your Professional and academic certificates and transcripts
 - Application processing fees
- Application Processing Fees Remitted to Seminary Account:**

Account name: Kenya Highlands University - Seminary
Account number: 0102824221701
Bank: Standard Chartered Kericho branch

 - Master's Degree applicants Ksh.1,500
 - Bachelor's Degree applicants Ksh.1,000

SECTION A

PERSONAL DETAILS

- Name: _____
(Surname) (Other names)
- Date of Birth: _____ Gender: (Tick) Male: Female:
(Day) (Month) (Year)
- Nationality: _____ ID/Passport No. _____
- Marital Status: (Tick) Single: Married:
- Do you have any disability? (Tick) Yes No If yes, explain _____
- Church Membership: _____ Pastor: _____
(name) (name)

7. Source(s) of my payment of Tuition & Fees:
 ___ % - From my personal and family resources
 ___ % - From my local church
 ___ % - From my employment income
 ___ % - Scholarship Needed (separate application is required)

CONTACT DETAILS

Postal Address: _____ Postal Code: _____
 Mobile: _____ Landline Tel No: _____
 Email: _____

PARENT’S/GUARDIAN’S/SPOUSE INFORMATION

Name: _____
 Postal Address: _____ Postal Code: _____
 Mobile: _____ Landline Tel No: _____
 Email: _____

SECTION B

1. FOR WHAT DEGREE ARE YOU APPLYING (Tick to choose only one)

- ___ Bachelor of Theology
- ___ Bachelor of Arts in Christian Ministries
- ___ Bachelor of Arts in Chaplaincy
- ___ Master of Arts in Theological Studies
- ___ Master of Arts in Christian Ministries

2. PREFERRED MODE OF STUDY (Tick to choose only one)

- ___ Face-to-face classroom only
- ___ Online distance learning only
- ___ Blended Face to Face and Online

3. PREFERRED LOCATION OF CLASSES (Tick to choose only one)

- ___ Kericho – Kenya Highlands Seminary Campus
- ___ Tenwek (Bomet)
- ___ Karen (Nairobi)

4. PREFERRED TIME OF CLASSES (Tick to choose only one)

- ___ Weekdays
- ___ Weekday evenings
- ___ Weekends
- ___ School holidays

5. ACADEMIC HISTORY

Institutions attended and qualification (attach certified copies of results slip/certificates)

School Name	Field of Study	Degree earned	Grade attained	Graduation Date

6. WORK EXPERIENCE/RESEARCH (where applicable)

Employer	Station of work	Occupation	Dates of Employment

SECTION C

1. ATTACH A 1,000-word (1 page) ESSAY DESCRIBING THE FOLLOWING:

- a. YOUR FAITH ENCOUNTER(S) WITH JESUS CHRIST.
- b. YOUR FAITH STATEMENT OF WHAT YOU BELIEVE.
- c. HOW HAS YOUR ENCOURTER(S) AND BELIEF INFLUENCED YOUR LIFE?
- d. WHAT DO YOU PLAN TO DO WITH THE DEGREE FOR WHICH YOU ARE APPLYING?
- e. WHAT IS YOUR ROLE IN THE BODY OF CHRIST (apostle, evangelist, teacher, preacher, shepherd, servant, other)?
- f. WHY DID YOU CHOOSE KENYA HIGHLANDS SEMINARY?

2. ATTACH ONE LETTER OF RECOMMENDATION FROM EITHER OF THE FOLLOWING:

- a. YOUR LOCAL PASTOR OR SPIRITUAL LEADER
- b. A SENIOR ACADEMIC OFFICER OR PROFESSOR OF THE LAST SCHOOL, COLLEGE, OR UNIVERSITY FROM WHICH YOU GRADUATED

SECTION D - DECLARATION BY APPLICANT

I hereby declare to the best of my knowledge and belief that the information I have given in this Application is true and correct. I understand that I will be disqualified if the information is later found to be inaccurate.

Signature _____ Date Signed _____

SECTION E - For official use only:

____ Approved ____ Not approved for admission

If Not approved reason: _____

Dean of the Seminary:

Name: _____ Signature _____ Date Signed _____

The Seminary Provost:

Name: _____ Signature _____ Date Signed _____