



For: Hospitality, Tourism, Language, Fashion & Computer Courses
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CITY & GUILDS EXAMINATION REGISTRATION FORM

STUDENT NAME: _ _ _ _ _

COURSE: _ _ _ _ _

ADMISSION No: _ _ _ _ _

LEVEL: _ _ _ _ _

TELEPHONE: _ _ _ _ _

DATE: _ _ _ _ _

Kindly attach **COPIES** of the following documents:

- a) National identity card

I.....of admission number.....Declare that the information provided in this form and in the attached documents is accurate.

Student's signature

Date (DD/MM/YY)

Accounts Office.....Date.....

Examination Office..... Date.....



Note: Retain a copy and submit the original form to the examination office.