



**DEFERRED FEES PAYMENT PLAN APPLICATION**

SEMESTER..... DATE ...../...../.....	
<b>STUDENT DETAILS</b>	
STUDENT ID NO.....	
STUDENT NAMES: _____, _____, _____ (Last) (First) (Middle)	
MAILING ADDRESS: _____	D.O.B ...../...../.....
POSTCODE _____ TOWN _____	PHONE: _____
MOBILE PHONE: _____ EMAIL ADDRESS: _____	
<b>EMPLOYMENT DETAILS</b>	
EMPLOYER: _____ _____	OFFICE PHONE: _____
OFFICE EMAIL ADDRESS: _____	
OFFICE PHYSICAL ADDRESS :	
OFFICE MAILING ADDRESS : P.O. BOX _____ POSTCODE _____ TOWN _____	
<b>PARENT/SPONSOR DETAILS</b>	
NAME: _____, _____, _____ (Last) (First) (Middle)	
PIN NO: _____	ID NO: _____
RELATIONSHIP TO STUDENT: Mother Father Guardian Other: .....	
MAILING ADDRESS: P.O. BOX _____ POSTCODE _____ TOWN _____	
PHYSICAL ADDRESS: _____	
OFFICE PHONE: _____ MOBILE: _____ EMAIL: _____	

(N/B Student must indicate sponsors details, if self-sponsored student must fill in employment details)

BALANCE FROM LAST SEMESTER (KSH/USD) \_\_\_\_\_

FEES FOR CURRENT SEMESTER (KSH/USD) \_\_\_\_\_

TOTAL FEES PAYABLE (KSH/USD) \_\_\_\_\_

<b>INSTALLMENT PLAN</b>	<b>DUE DATE</b>	<b>AMOUNT</b>
First Installment $\frac{1}{3}$	7th of _____ 201_____	-
Second Installment $\frac{1}{3}$	7th of _____ 201_____	-
Third Installment $\frac{1}{3}$	7th of _____ 201_____	-
	<b>Total</b>	-

*\*There will be a 1.5% interest charge on monthly balances*

This form **MUST** be accompanied by the following documents:

1. Data sheet(course &fee statement)
2. Copy of PIN Certificate(from KRA)
3. Proof of residence(any Utility bill)
4. Copy of National Identity card/Passport
5. Proof of ability to pay(Payslip or Bank statement)

**DECLARATION OF COMMITMENT**

I acknowledge the above debt and undertake to abide by the above arrangement and accept that failure to adhere to it may result in cancellation of Registration, removal from class and use of other legal process to recover this debt.

Signed (Student): \_\_\_\_\_ Date: \_\_\_\_\_

Signed (Witness): \_\_\_\_\_ Date: \_\_\_\_\_

Signed (Parent/Sponsor): \_\_\_\_\_ Date: \_\_\_\_\_

Signed (Witness): \_\_\_\_\_ Date: \_\_\_\_\_

**For Official Use:**

Date received: .....

Data Sheet attached Y/N Statement of Account attached Y/N

Proof of ability to pay attached Y/N Proof of Residence attached Y/N

Copy of PIN certificate attached Y/N Copy of National Identity card/Passport attached Y/N

Processed by: ..... Date: .....

Approved by: ..... Date: .....