KENYA HIGHLANDS SEMINARY
Equipping the saved to serve

a subsidiary of Kenya Highlands University

AFFIX PASSPORT SIZE

2" x 2"

PHOTOGRAPH

HERE

OFFICE OF THE ACADEMIC DEAN

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

APPLICATION FORM

APPLICATION GUIDELINES

1. This form should be **FILLED** and emailed to admissions@khs.ac.ke
2. **Email Attachments copies of:**
   a. Your Identification Card
   b. Your Professional and academic certificates and transcripts
   c. Application processing fees
3. **Application Processing Fees Remitted to Seminary Accounts:**

   Account name: Kenya Highlands University - Seminary
   Account number: 0102824221701
   Bank: Standard Chartered Kericho branch
   Lipa na M-pesa Paybill: 329329
   Account number: 0102824221701

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

SECTION A

PERSONAL DETAILS

1. Name: _____
   (Surname) (Other names)
2. Date of Birth: _____ _____ _____ Gender: (Tick) Male: ☐ Female: ☐
   (Day) (Month) (Year)
3. Nationality: _____ ID/Passport No_____
4. Marital Status: (Tick) Single: ☐ Married: ☐
5. Do you have any disability? (Tick) Yes ☐ No ☐ If yes, explain_____
6. Church Membership:_____ Pastor: _____

Kenya Highlands Seminary exists to support the church to discover, develop and deploy Spirit-filled leaders to spread scriptural holiness throughout the world.

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

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
   ___ Karen
4. **PREFERRED TIME OF CLASSES** (Tick to choose only one)
   ___ Weekdays
   ___ Weeknights
   ___ 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 TWO LETTERS OF RECOMMENDATION FROM 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_____

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SECTION E - For official use only:

____Approved ____ _Not approved for admission

If Not approved reason: _____

Admissions Officer:

Name: _____ Signature_____ Date Signed_____

The Seminary Academic:

Name: _____ Signature_____ Date Signed_____