



DEDAN KIMATHI UNIVERSITY OF TECHNOLOGY

P.O. BOX 657 - 10100, NYERI

TELEPHONE: 0709202914, Ext. 1032

E-mail: registraraa@dkut.ac.ke; website: www.dkut.ac.ke

Office of the Registrar, Academic Affairs & Research

REGISTRATION CHECKLIST FOR NEWLY ADMITTED STUDENTS (Page: 1 of 1)

Document No: DeKUT/AAR/APK&APS/FORM 2/5
2025/2026 Academic Year

SECTION A: STUDENT 'S DETAILS (TO BE COMPLETED BY THE STUDENT)

FIRST NAME:.....MIDDLE NAME.....SURNAME.....

PROGRAMME ADMITTED TO:.....

REGISTRATION NUMBER:.....

YEAR OF STUDY:..... DATE:.....

TEL NO.:..... E-MAIL ADDRESS:.....

SECTION B: PRESENTATION AND VERIFICATION OF DOCUMENTS (TO BE FILLED BY THE VERIFYING ADMISSIONS OFFICER)

S/NO	DOCUMENT NAME	DOCUMENT CODE	REMARKS
1	Original Copy of Admission Letter		
2	Original National ID Card/Passport		
3	Original Birth Certificate		
4	Original Academic Certificates/Transcripts/Result Slips		
5	Original Secondary School Leaving Certificate		
6	Copy of National ID/ Passport		
7.	Copy of Birth Certificate		
8	Copy of Academic Certificates/Transcripts/Result Slips-KCPE, KCSE, Diploma, Undergraduate, Masters etc		

9.	Copy of Secondary School Leaving Certificate		
10.	Copy of Printed Personal Details Form obtained after Online Registration Exercise	DeKUT/AAR/APK & APS/FORM 3/5	
11	Medical Examination Report (attach one official coloured passport size photograph)	DeKUT/AAR/APK& APS/FORM 4/5	
12	A Duly Signed copy of Students' Code.	DeKUT/AAR/APK & APS/FORM 5/5	

Name of the Verifying Admissions Officer:.....

Signature:..... Date..... Stamp.....

Note: This Form must be retained by the Admissions Officer verifying the Student's Documents on behalf of the Registrar, Academic Affairs & Research.