

OFFICE OF THE REGISTRAR ACADEMIC AFFAIRS & RESEARCH DEDAN KIMATHI UNIVERSITY OF TECHNOLOGY

P.O BOX 657-10100 NYERI, KENYA

TELEPHONE: 0713-835-965 EMAIL: registraraa@dkut.ac.ke

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 ADDRE	ESS:	

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.