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Bandari Maritime Academy Building Archbishop Makarios Close P.O. Box 99469 - 80107

Mombasa

**BANDARI MARITIME ACADEMY**

Office of the Registrar

# COURSE APPLICATION FORM

Course Applied: …………………………………………………………………………………..............

Surname: …………………………………..Other Names ………………………………………………….

Gender (M/F) ……………………………………………………………………………………………..

Date of Birth: …………………………………………………... ID/Passport No. ………………………

County: …………………………………………………………..……………………………………….

Permanent Address: ……………………………………………. Town ………………………………….

Contact Address: ……………………………………………… Email …………………..……………….

Cell/Phone Number: ……………………………………………………………………….………………

Nationality: ……………………………………………………. Marital Status………………………….

Name of Parent or Guardian: …………………………………… Cell/Phone Number: ………………….

# Education /Training

|  |  |  |  |
| --- | --- | --- | --- |
| **Institution Attended** | **Dates** | | **Qualification Attained** |
|  | **From** | **To** |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Other Academic or Professional Qualifications**

|  |  |  |  |
| --- | --- | --- | --- |
| **Institution Attended** | **Dates** | | **Overall Grade** |
| **(Start with Current)** | **From** | **To** |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

# Working Experience

|  |  |  |
| --- | --- | --- |
| **Name of Organization**  **(Start with current)** | **Post Held** | **Dates** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

Attach copies of the Relevant Certificates, and National ID/Birth Certificate.

# Declaration

I, , declare that the information given in

this application form is correct.

Sign: ……………………………………………………….. Date: ……………………………….

# FOR OFFICIAL USE ONLY

|  |  |  |  |
| --- | --- | --- | --- |
| **Date Received** | **Folio No.** | **Date Selected** | **Date Rejected** |
|  |  |  |  |

Signature …………………………………………………. Date: …………………………………

# (Chairman – Selection Committee)