



RCPI BIBLE COLLEGE & SEMINARY

STUDENT ADMISSION FORM

Accredited by TVETA – Kenya | Ruach Chayah Bible & Vocational Training Center

• Main Campus Address: P.o Box 10432-30100, Eldoret

✉ Email: rcpibiblecollege@gmail.com | ☎ Phone: +254-722-625102 | +254-723-464498

I. PERSONAL INFORMATION

- **Full Name:** _____
- **Date of Birth (DD/MM/YYYY):** _____
- **Gender:** Male Female
- **Nationality:** _____
- **ID/Passport Number:** _____
- **Marital Status:** Single Married Other

2. CONTACT INFORMATION

- **Postal Address:** _____
- **Town/City:** _____
- **County:** _____
- **Phone Number:** _____
- **Email Address:** _____

3. PROGRAM INFORMATION

- **Course Applied For:**
 Certificate Diploma Bachelor's Master's Other: _____
 - **Specify Program (e.g., Bachelor of Theology):**

 - **Preferred Mode of Study:**
 Full-time Part-time Online/Distance Learning
 - **Preferred Intake:** January May September Other: _____
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4. EDUCATIONAL BACKGROUND

Level	School/College Attended	Year Completed	Qualification Obtained
High School:			
College/University :			
Other			

5. CHURCH AFFILIATION

- Home Church: _____
 - Pastor's Name: _____
 - Pastor's Contact: _____
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6. NEXT OF KIN / EMERGENCY CONTACT

- Full Name: _____
 - Relationship: _____
 - Phone Number: _____
 - Email Address: _____
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7. DECLARATION

I hereby declare that the information given above is true and correct to the best of my knowledge. I understand that providing false information may result in the termination of my admission.

Applicant's Signature: _____ **Date:** _____

FOR OFFICIAL USE ONLY

Item	Status	Remarks
Admission Number		
Application Fee Paid	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Documents Verified	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Interview Conducted	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Admission Decision	<input type="checkbox"/> Admitted <input type="checkbox"/> Not Admitted	

Registrar's Signature _____
Date of Admission _____