



THE KENYA ENGINEERING TECHNOLOGY REGISTRATION BOARD
Haile Selassie Avenue, P. O. Box 37046, Nairobi, 00200,
Tel: +254 740 137877: E-mail:kengtrb@gmail.com Website: www.ketrb.go.ke

APPLICATION FORM FOR REGISTRATION AS CANDIDATE ENGINEERING TECHNOLOGIST

THE REGISTRAR

KENYA ENGINEERING TECHNOLOGY REGISTRATION BOARD
P.O. Box 37046-00200, NAIROBI

All information to be printed in the English language

Surname

Other Names

Title (Prof., Dr., Mr., Mrs., Miss)

Date of Birth Gender: Male [] Female []

Nationality:

Postal Address: Code: Town:

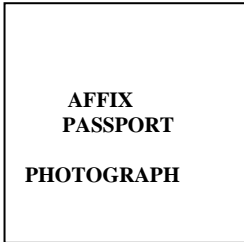
Mobile Phone No: Email:

Academic qualifications (Starting with the highest to the lowest):

1.
2.
3.
4.

Field of Specialization

Name and address of your employer:
.....



EDUCATION:

Institutions Attended	From (Yr)	To (Yr)	Qualification Obtained	Month and Year

MEMBERSHIP OF PROFESSIONAL SOCIETY OR ASSOCIATION:

S/No	Name of Society	Registration Number

Payments should be deposited to Kenya Commercial Bank Account No. 1204751641 Haile Selassie Avenue Branch, NAIROBI and Account name Kenya Engineering Technology Registration Board or Mpesa KCB Paybill No. 841250, Account No. [Your Name]. The ORIGINAL SLIP or TRANSACTION NUMBER should be sent to the Board.

1. I attach the original bank pay-in slip (transaction number) of **KES 2,000/= (or US Dollars 40** for foreigners) application fee of which I understand is not refundable.
2. I hereby certify that the foregoing statements are true and correct and that I have read the Engineering Technology Act, 2016 and the regulations and understand that, if registered, I shall be bound thereby and by any amendments thereto so long as my name remains on the Register for Candidate Engineering Technologists.

Signature:

Date:

***NOTE:** This application form must be accompanied by a copy of your resume, two coloured Passport Size Photos, copies of the original Certificates and a copy of the National ID. Card or Passport all duly certified by a Commissioner of Oaths whose names and address are fully displayed on the Rubber Stamp.*

Candidates from Foreign Institutions should attach certified copies of the transcripts, address/email address of the university and the contact person.

For office use only:

Deposit receipt No

Registration Number..... Date of Registration

Candidate Notification Date

Name of Officer:..... **Title:**.....