



KENYATTA UNIVERSITY

Directorate of Endowment & Alumni Programmes

P.O Box 43844 – 00100 GPO Nairobi

Tel. +254-20-8703866/4346 / +254-20-2401807

E-mail: alumni@ku.ac.ke

Alumni Registration Form

The Directorate of Endowment & Alumni Programmes is currently updating its database. The Purpose of this is to **know** our alumni, **connect** with them, **honour and involve** them in all University's activities. To help us facilitate this process, we are requesting you to complete this form and submit it to us as soon as possible.

Title (Prof., Dr., Mr., Ms. etc)		Surname	
First Name		Middle Name	
Registration Number: Surname (If different when at Campus)		E-mail Address..... Telephone No	
Current Address	Box No.	Post Code	
	Town/City	County	Country:
Faculty/School 1. 2. 3.		Area of Specialization	
Qualification gained (BA, Bsc, MA, Ph.D etc) 1. 2. 3.			Year of Graduation 1. 2. 3.
Name of Current Employer/Organization if employed		Job Title	
If self employed (Tick)		Company/Business name	