**FORM 39(a) APPLICATION OF INDEXING OF ANIMAL HEALTH STUDENTS**

PHOTO

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| **KVB OFFICIAL USE** | |
| Index number |  |
| Indexing Officer |  |

**IMPORTANT INFORMATION**

This form MUST be completed in FULL and submitted to the Registrar, Kenya Veterinary Board within 30 days following commencement of the training.

All applications MUST be accompanied with copies of your National Identity (ID) Card/ Passport, Certified KSCE Examination Results Slip, Secondary School Leaving Certificate, and 1 (one) coloured passport size photograph. Upon upgrading, applicants must attach copies of previous certificates/ qualifications and practice license.

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| *Application Information [PRINT]* | | | | | | |  | |  |
| Surname |  | | ID/Passport No. | | |  | Email address | |  |
| Middle Name |  | | Citizenship | | |  | Personal Mobile phone | |  |
| First Name |  | | Home Address | | |  | Date of birth | |  |
| *Training information* | | | | | | | | | |
| Secondary school attended | | |  | | | | Grade obtained | |  |
| Certificate held | | |  | | Training institution | |  | | |
| Certificate no. | | |  | | Date training commencement | |  | | |
| Training cadres *[Clearly tick the course to be undertaken]* | | | | | | | | | |
| Certificate in Animal Health | | |  | Bachelor of Veterinary Medicine | | | |  | |
| Diploma in Animal Health | | |  | Other (specify) | | | |  | |
| *Declaration* | | | | | | | | | |
| I hereby declare that the foregoing information is true and correct to the best of my knowledge | | | | | | | | | |
| *Applicant signature:* | | | | *Date:* | | | | | |
| I hereby declare that the applicant is suitable to be indexed by the Kenya Veterinary Board | | | | | | | | | |
| *Dean/Principal of Animal Health Training Institution*  *[Please include official stamp]* | | | | | | | *Date:* | | |
| *Name:* | | *Signature:* | | | | |  | | |