TSC/REG/	Market State	



## TEACHERS SERVICE COMMISSION APPLICATION FOR REGISTRATION OF TEACHERS

## Section A: Important Notes for Applicants

- All sections of this form MUST be completed in full.
- 2. Please forward the completed original application form together with:
  - (a) Duly certified (by the Agent) photostat copies of:
    - (i) National Identification card (both sides) or passport.
    - (ii) Academic and professional certificates and other relevant documents.
  - (b) A non-refundable fee of KSh. 500 (five hundred only) in the form of crossed money/postal order.
  - (c) GP 69 form from a government doctor.
  - (d) Two recent passport size studio photographs (NOT PHOTO ME MACHINE); to the Secretary, Teachers Service Commission, Private Bag, Nairobi, 00100, Kenya.
- It is a serious offence to wilfully give false information to the Teachers Service Commission. The law provides that any person convicted of the offence may be fined up to KSh. 5,000 or imprisoned for six (6) months or both (Section 21 (1) Subsection (a) of the Teachers Service Commission Act, Cap 212 refers)

## Section B: Applicant's Details

1.	Full	names
		(in BLOCK, state whether Mr., Mrs. or Miss etc.)
Ма	iden N	Name if Married woman (Name before marriage)
		(in BLOCK)
Reg	te:- gister olicati	The full names as stated on this form must be the names appearing in the of Births and in the academic and professional qualifications attached to the on.
2.	(a)	Date of Birth
	(b)	ReligionDenomination
	(c)	Permanent Address
	(d)	Contact Address
	(e)	Telephone Number(s)

b. ]	By Naturalizati	on: Certificate N	о		****************	·
	*Delete whiche	ver is not applic	cable			
If r	not a Kenya citi	zen, state natior	nality	**********	************	*****************************
Ali	en/Passport No		**********			
		rofessional Qua				
Educa	tion Name	of Institution	Date (Years)		Certificate	Certificate No.
			From	To	obtained	and Date
Primar	y			,	7	
	*					
Second	lary					
Techni	ool.					
reciiii	cai					
College	2					
C.C. CO. C. C.			_			
Univer	sity					
5. Tea	ching Subjects					
(a)						
(b)	Minor subject	r(s) studied	*******			***************************************
260	tails of Certific		***********			
20000 0000000			(D1/10//	4.50		
(a)						***************************************
ă.						~********************
(b)						***************************************
	(Applicable to qualification. authority for p	If unable to g	romoted ive the pr	subsequ omotion	ent to date of certificate nu	gaining their first mber, please state
(c)	Licence to tea	ch No				***************************************
	(Applicable to	o all unqualifie private school j	d teacher	s applyi	ng for registra	ition and who are No.90 dated 22nd

3. State if you are a Kenya citizen:

	A CONTRACT OF THE RESIDENCE OF THE PROPERTY OF	tered with the Teachers Service Commission?			
If so	o, state previous TSC Number				
Have you ever been dismissed or otherwise removed from the Civil Service, otherwise Service, the Teaching Service or private sector?					
If so, give details					
Have you ever been convicted of any charge in a court of law?					
f th	e answer is "Yes" give the follow	ing particulars:			
(a)	Offence for which convicted	A			
b)	Date and place of conviction				
c)	Sentences imposed				
d)	Have you ever, with or without probation order?	t being convicted been made the subject of a			
	***************************************				
cas nsta Oo y	ne will be considered on its named on its named considered on its named considered on its named consumer from any medical, physical consumer from any medical, physical consumer from any medical, physical consumer from any medical consumer from register from regist	tration by the Teachers Service Commission. nerit having regard to the nature and the			
Ye	s, give details				
101		***************************************			
200	***************************************	***************************************			
***		***************************************			
A	medical Certificate of Fitness f	rom a Government medical doctor must be			
	- Constituentiare, Dui in iniphinga	al history given will not necessarily put an to form useful background information which h a teacher may be posted.			
I co	ertify that the particulars furnished	d on this form are correct.			
	Signature of Applicant	Date			
	Ye Ye A atta	The fact of an applicant declaring the cessarily debar him/her from regis case will be considered on its nestances of the offence.  The you suffer from any medical, physics/No.  Yes, give details.  A medical Certificate of Fitness fattached to this form.  The physical impairment or medical.			