



TAITA TAVETA UNIVERSITY
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STUDENTS' DATA SHEET

Registration No.

Surname:

Other Names:

Date of Birth (dd/mm/yy)

Gender (tick) **Male** ☐ **Female** ☐

ID/ Passport No:

County:

Phone / Mobile No:

Email address:

Course:

Department:

School:

Centre / Campus:

Year of Study:

Sponsor (tick) **G.O.K** ☐ **Self** ☐ **Other** ☐

EMERGENCY CONTACTS

Name:

Address:

Phone No:

Relationship: