



KENYA SCHOOL OF MONETARY STUDIES

A School of The Central Bank of Kenya

COURSE REGISTRATION FORM

Course Details

Course Title:	
Course Venue:	

Nominee Details

Full Names:	
Next of Kin (Name / Telephone)	
Academic Qualifications:	
Professional Qualifications:	
Gender:	
Email:	
Mobile Phone No:	
Nationality:	

Passport Details:

Passport Number:	
Date of Issue:	/ /
Date of Expiry:	/ /

Current Employment Details:

Name of Organisation:	
Department:	
Job Title:	
Summary of Current Duties	

Other Details	
Languages:	
Any Special Need? (Dietary):	
Any Special Need? (Physical):	
Date of Arrival:	
Date of Departure:	

24 hour Contact Person in Case of Emergency	
Name:	
Relationship:	
Telephone:	
Email:	

Please email your duly filled Course Registration Form to:

Email: ksmsmdc@ksms.or.ke

or

Contact us through:

Tel: (+254) 20 8646 734/ 738/ 712