



THE KENYA SCHOOL OF LAW

CONTINUING PROFESSIONAL DEVELOPMENT, PROJECTS & RESEARCH
DEPARTMENT (CPD)

WORKSHOP/SEMINAR/TRAINING

REGISTRATION FORM

(Please fill part A and, if you elect to do so, Part B)

PART A *(to be filled in block letters)*

1. Name
(Surname) (Other names)
2. Gender (male/female/other).....
3. Identity/Passport Number
4. Name of your organization
5. KRA PIN of the sponsoring organization.....
6. Physical and postal address.....
.....
.....
7. Telephone Contacts:
Landline/Telkom Wireless
- Cell-phone
- E-mail:
8. Nationality
9. Profession/Occupation
10. Training for which registration is made.....
Signature:

PART B (NOTE: *This part is optional*)**1. Academic/Professional Qualifications:**

QUALIFICATIONS	COLLEGE/UNIVERSITY ATTENDED	YEAR OF COMPLETION	ATTAINMENT
(i) Academic			
(ii) Professional			

2. Working /Research experience:

EMPLOYER'S PARTICULARS	STATION OF WORK	NATURE OF ENGAGEMENT	PERIOD