

## REPUBLIC OF KENYA COUNTY GOVERNMENT OF NAKURU NAKURU COUNTY PUBLIC SERVICE BOARD



PROVINCIAL PUBLIC WORKS BUILDING, OFF KABARAK NAKURU ROAD, ALONG PRISONS ROAD
P.O. BOX 2870-20100 NAKURU, KENYA

E-mail: countypublicserviceboard@nakuru.go.ke

## APPLICATION FOR INTERNSHIP PROGRAMME FORM

## **Instructions for applicant:**

Please fill this form in **BLOCK** letters and do not leave any section blank, sections that do not apply should be marked N/A.

You are **ONLY** required to attach a copy of the following documents:

- i. National Identity card;
- ii. KCSE certificate;
- iii. College/University Degree/Diploma/Certificate as applicable;
- iv. Certificate of Good Conduct.

## 1. INTERNSHIP AREA OF SPECIALIZATION

Area of Specialisation		Course Code	
2. PERSONAL DETAILS OF THE APPLICANT	l		
Name(Surname)	(First name)	(Middle name)	
ID No	Date of Birth(dd-m	Gender	
Nationality	•		
County	Sub County	Ward	
Postal Address	Code	Town/ City	
Mobile No	E-mail		
Name of alternative contact person		Mobile No	
Are you a Person living with disability? Yes If yes indicate; - (i) Nature of disability		s applicable)	
(ii) Details of registration with the National	Council for Persons with Disability	(Registration number)	

YEAR	. ACADEMIC QUALIFICATIONS (Starting with the highest)						
YEAR		Name of institution attended (Secondary, TVET/College/ University.)	Qualifications (specify the degree, diploma, certificate awarded, KCSE)	Class/ Grade/ Score			
FROM	то	Cimeratory					
CLARATION							
ertify that th	e particulars giv	en on this form are correct and under	rstand that any incorrect/misleading i	nformation may lead to			
qualification	and /or legal a	ction.					
te	(dd-mm-yy		Signature of applicant				
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