

REGISTRATION NUMBER:



SOUTH EASTERN KENYA UNIVERSITY

Information to New Students and The Joining Instructions

JOINING INSTRUCTIONS

1. LETTER OF ACCEPTANCE (JI/1(A))

Form JI/1A to be completed and returned during registration.

2. NON-ACCEPTANCE OF OFFER (JI/1(B))

If you do not accept the offer of admission you must complete **FORM JI/1 (B)** and return it to the Admissions Office immediately.

3. STUDENTS PERSONAL DETAILS (JI/2)

You are required to complete **Form JI/2** and attach **Two Passport Size Photographs (Color)**. Please write your Registration Number as it appears in the Admission Letter at the back of each Passport Size Photograph.

4. DECLARATION FOR ADMISSION / RE - ADMISSION /STUDENTSHIP (JI/3)

i) All candidates accepting an offer of admission must undertake to complete the course they have been admitted to. Students should therefore read carefully and sign **FORM JI/3**.

ii) **BOND** - Attached to **FORM JI/3** is a **BOND** governing undergraduate admission, re-admission and studentship. Students are expected to familiarize themselves with the conditions spelt out in the **BOND** and to have it executed as required. The executed **BOND** must be returned to the University on the registration day.

5. RULES AND REGULATIONS GOVERNING THE ORGANISATION, CONDUCT AND DISCIPLINE OF STUDENTS

All students are expected to read and understand the Rules Governing the Organization, Conduct and Discipline of Students and are expected to adhere at all times to the parameters of discipline and conduct as per the attached documents.

6. STUDENTS CONDUCT DECLARATION (JI/4)

Every student must sign declaration **FORM JI/4** signifying that they have read and understood the content and meaning of the Rules and Regulations Governing the Conduct and Discipline of Students. The signed declaration must be submitted during registration.

7. SPONSORSHIP FORM (JI/5)

All students who will be sponsored by their guardian and any other sponsor other than the Kenya Government should have **FORM JI/5** signed by the sponsor as soon as they receive their admission letter.

8. ACCOMODATION APPLICATION (JI/6)

All students must complete and return University Accommodation **Form JI/6**. They must pay particular attention to **Section A** of the Accommodation Application form. Those who do not wish to be accommodated in the Halls of Residence must complete **Section B** of the form and hand it in during registration.

9. ACCOMMODATION DECLARATION (JI/7)

Students who apply for accommodation must also complete and submit the Accommodation Declaration **Form JI/7**.

10. IMPORTANT INFORMATION ON UNIVERSITY PROCEDURES AND PROCESSES (JI/8)

All students are expected to read and understand the procedures and processes of inter-School transfers, withdrawal, deferment and re-admissions outlined in **FORM JI/8**

11. MEDICAL EXAMINATIONS (JI/9)

- i) Admission to the University is conditional upon receipt of a satisfactory medical report. Students must therefore undergo a medical examination by a registered medical practitioner before coming to the University. FORM JI/9 is attached for this purpose to be completed by the examining doctor and the same should be submitted on the date of registration.
- ii) Medical attention at the University - The University Clinic is open to all students but they are advised to be prepared to meet expenses of any medical attention not provided for by the University.
- iii) Dental and Optical Treatment - The University does not provide dental or optical treatment. Students have to make their own arrangements and meet expenses for such treatment.

12. MEDICAL CONSENT FOR MINORS (JI/10)

Parents (or guardians of students who are under 21 years of age are required to sign **FORM JI/10**

13. FEES STRUCTURE (JI/11)

Students are advised to familiarize themselves with information provided in **FORM JI/11** regarding fees structure and take necessary action regarding each of these items well before reporting to the University.



SOUTH EASTERN KENYA UNIVERSITY
LETTER OF ACCEPTANCE BY THE CANDIDATE

**1 Colored Passport
Size Photographs**

SECTION A: (to be completed by those ACCEPTING the offer)

Dear Sir,

Candidate's Name _____
(Surname)

(Other names)

K.C.S.E. Index No. _____ Year _____

With reference to your letter offering me a place in the School of

For a course leading to the Degree of _____

This is to confirm that

I DO ACCEPT the offer and **I PROMISE TO ABIDE** by the Rules and Regulations governing the Organization, Conduct and Discipline of the Students of the South Eastern Kenya University, as spelt out in **STUDENTS CONDUCT Clause 1.3** which is prepared in accordance with the South Eastern Kenya University Legal Notice No.102 of 15th July 2008. I also undertake to obey the instructions of the University Authorities at every level of administration.

I require/do not require Government Loan (Delete one which is not applicable)

FULL NAME: _____

I.D. NO.: _____

SCHOOL/DEGREE COURSE ADMITTED: _____

UNIVERSITY REGISTRATION NO.: _____

SIGNATURE: _____

SECTION B: (to be completed by those NOT ACCEPTING the offer)

Dear Sir,

Candidate's Name: _____
(Surname) (Other Names)

University Reg. No. _____

K.C.S.E. Index No. _____

With reference to your letter offering me a place in the School of _____

For a course leading to the Degree _____

This is to confirm that **I WILL NOT ACCEPT** the offer, because of the following reasons:-**(Mark X against that which is applicable)**

1	Family Problems	
2	Ill Health	
3	I have been offered an Overseas Scholarship	
4	I have taken on employment	
5	I have joined the Module II Programs	
6	Any other reasons	

Yours faithfully, _____

Signature: _____

Date: _____

SOUTH EASTERN KENYA UNIVERSITY**STUDENT'S PERSONAL DETAILS**

Information provided in this form is intended to help the Office of the Academic Registrar understand the student welfare better. It will be used for purposes of improving welfare while at the University

(TO BE COMPLETED IN BLOCK LETTERS)

Full Name: (Surname first) _____

Date of birth (DD/MM/YYYY) _____ Gender: _____ Marital status: _____

National Identification Number (ID No.) _____ Birth Certificate No. _____

K.C.S.E. Index No. _____ K.C.S.E YEAR _____

K.C.P.E. Index No. _____ K.C.P.E. YEAR _____

Disability if any (Specify Nature of the Disability) _____

University Registration Number _____

Nationality _____ Religion _____

Postal address _____ Postal Code _____ Town _____

Cell Phone No. _____ Email address _____

Full name of father/guardian _____

Occupation of father/guardian _____

Full name of mother _____

Occupation of mother _____

Name/s of brothers and sister/s and addresses:

County of birth _____ Sub-County _____

Location/Street _____ Name of Chief _____

Division _____ District _____

Place of Permanent Residence: Village/Estate: _____

County of Residence _____
(i.e. County at which your loan/allowances will be processed and paid)

Give names and addresses of two persons who can be contacted in case of emergency

NAME	RELATIONSHIP	ADDRESS & TEL.NO
i) _____	_____	_____
ii) _____	_____	_____

Name and address of secondary school attended _____

Date _____ From _____ To _____

K.C.S.E. results - (Subjects and grades)

Any other institutions attended and qualifications attained _____

Games/Sports: Which games are you interested in? _____

If you represented your school, etc. in games please give details. _____

Clubs, Societies and Hobbies: Which clubs, societies and hobbies are you interested in?
Please give details of your participation. _____

Do you suffer from any impairment? If so give details. _____

Please give any information you think is useful for you to communicate to the University.

I certify that the information I have provided is correct.

Signature _____ Date _____

SOUTH EASTERN KENYA UNIVERSITY

DECLARATION FOR ADMISSION/RE-ADMISSION/STUDENTSHIP

(To be completed in BLOCK LETTERS)

I, _____ of National Identity Card No.

_____ and student Registration No. _____

having been notified of my admission/re-admission to the South Eastern Kenya University,
School/Degree Course _____

Do hereby bind myself solemnly and undertake to comply with the following conditions.

1. That throughout my academic pursuit and stay in the University, I will as any other citizen of the country conduct myself in accordance with the provisions of the Laws of Kenya.
2. That I will diligently apply myself to my prescribed course of study within the University in accordance with the relevant statutes rules, syllabi and practices of the University.
3. That I undertake to attend all scheduled lectures, tutorials, seminars and practicals and all other instructional activities that will be required of me by University Authorities during my academic pursuit in the University.
4. That I acknowledge and duly submit myself to the disciplinary authorities of the University as defined in the Rules and Regulations Governing the Organization and Conduct of students of the University. In particular:-
 - a) Bind myself to refrain from engaging in any unlawful activities that may be deemed to be prejudicial to the interest of the University and other students and in particular I will abstain from inciting, obstructing or in any manner stopping any other students from attending lectures or obstructing a member of the University from giving lectures or such other instructions;
 - b) Undertake not to convene or join any unauthorized and/or unlawful demonstrations, processions, gathering and activities or in any way to be a party to any activities deemed prejudicial to the good order and running of the University;
 - c) Undertake at all times to conduct myself in such manner as to uphold the dignity of the University and not to permit anyone to influence me to commit any breach of rules, regulations or practices of the University;
 - d) Undertake to conduct myself at all times, within and outside the precincts of the University, in a responsible and socially acceptable manner which upholds the dignity of and public confidence in the University
5. That I bind myself by this instrument fully conscious that should I be found in breach of any of the above conditions, or should I in any way conduct myself in a manner prejudicial to the University, other students, members of the University or members of the public, I shall be expelled from the University; and
6. That I unconditionally execute the relevant bond required of me by the University as a condition of admission/re-admission/studentship.

DATED THIS _____ DAY OF _____ 20 _____

SIGNED _____

Witness to the above signature _____

Parent/Guardian

Dean of the School _____



SOUTH EASTERN KENYA UNIVERSITY

BOND

GOVERNING UNDERGRADUATE ADMISSION, RE-ADMISSION AND STUDENTSHIP

1. **THIS BOND** is made by the South Eastern Kenya University Council and Senate (hereinafter referred to as 'The University' and forms part of the **(binding terms and conditions)** upon which anyone may be admitted, re-admitted into, or permitted to remain in undergraduate studentship in the University.
2. **THIS BOND** shall be considered ready for execution as from _____ and once executed shall remain in force in its present form for all undergraduates governing their admission, re-admission and studentship throughout their tenure of studentship, subject to such special decision as the enacting Authority may at its sole discretion take in relation to particular cases, until such time as the University may vary the bonds content, in such manner as the enacting Authority may deem fit.
3. **THIS BOND** shall bind jointly and severally, all persons being admitted or re-admitted into, or allowed to remain in studentship in the University, and their parent/guardian and the enacting Authority and an appropriate undertaking in the form prescribed in **THIS BOND** shall be made by **both** the person admitted or readmitted into or allowed to remain in studentship in the University, and the parent/guardian of the person in the presence of a Judge, a Magistrate or an Advocate.
4. **THIS BOND** shall bind the Parent/Guardian of any student being admitted or re-admitted into, or allowed to remain in studentship in the University to pay to the Student Finance Office, at the beginning of each academic year, or at such other time as the University Senate may prescribe and communicate to the persons in question, the appropriate fees applicable as per the fees structure and as determined by the University from time to time.
5. By **THIS BOND** the Parent/Guardian undertakes to pay the required fee, and the applicant undertakes to secure this undertaking and to ensure the fee is dully paid and delivered on time as required in the terms of Paragraph 4 hereof.

THIS BOND IS EXECUTED at _____

THIS _____ DAY OF _____ 20 _____

(I). SIGNATURE OF
PARENT/GUARDIAN)

BEFORE ME

Judge, Magistrate or Advocate)
(Signature and Stamp)

(II). NAME IN FULL
SIGNATURE OF STUDENT
OR APPLICANT

(III). SCHOOL/DEGREE COURSE

(IV). UNIVERSITY
REGISTRATION NO.

(V). BEFORE ME

Judge, Magistrate or Advocate)
(Signature and Stamp)

ACADEMIC REGISTRAR (AR)
(On behalf of the University)



SOUTH EASTERN KENYA UNIVERSITY

PERMISSION TO USE PHOTOS FOR THE CATALOG/WEBSITE

I Registration Numberhereby give my consent to South Eastern Kenya University, her legal representatives, successors and assigns the right to photograph and then use, reproduce and publish said images of me in the Student Catalog.

I agree that the photographs/negatives thereof shall constitute the sole property of South Eastern Kenya University, with full right of disposition in any manner whatsoever, including the right to publish on their website.

I hereby release South Eastern Kenya University and her legal representatives, successors and assigns from any and all claims whatsoever in connection with the use, reproduction, publication of the images thereof.

Dated thisday of2024.....

Name. _____

Signature. _____

National Identity Card Number. _____

Birth Certificate No. _____

SOUTH EASTERN KENYA UNIVERSITY

REGULATIONS GOVERNING THE ORGANIZATION CONDUCT AND DISCIPLINE OF STUDENTS
AT THE UNIVERSITY

DECLARATION

I, _____ ID.No. _____
 declare that I have read the regulations governing the Organization, Conduct and Discipline of
 Students at the South Eastern Kenya University, and understood their content and meaning, and
 undertake to abide by them.

SIGNED _____ DATE _____

SCHOOL ADMITTED TO & DEGREE COURSE _____

KCSE INDEX NO. _____ YEAR _____

UNIVERSITY REGISTRATION NO. _____

THIS DECLARATION IS EXCECUTED AT _____ THIS _____

DAY OF _____

BEFORE ME:

.....
 (JUDGE, MAGISTRATE OR COMMISSIONER FOR OATHS)
 SIGNATURE & STAMP

.....
 ACADEMIC REGISTRAR (AR)
 (On behalf of the University)

SOUTH EASTERN KENYA UNIVERSITY

TO BE COMPLETED BY THE SPONSORING AUTHORITY

Name of candidate_____

Course Admitted to_____

Registration Number_____

We are prepared to sponsor the above named candidate for the course of study leading to the degree of Bachelor of (insert course for which the candidate has been admitted)

SIGNATURE _____

TITLE _____

NAME _____

ADDRESS _____

TELEPHONE NUMBER _____

DATE_____

- NB:**
- 1 All privately sponsored candidates are requested to get this form signed by their Sponsors as soon as they receive their offers. Students in this category should make arrangements to pay fees due in advance prior to the registration day.
 - 2 Kenyan students applying for Loan from Higher Education Loans Board do not need to complete this form.

SOUTH EASTERN KENYA UNIVERSITY

UNIVERSITY ACCOMMODATION APPLICATION FORM

SECTION A

TO BE FILLED BY THOSE WHO NEED ACCOMMODATION

This application does NOT guarantee the applicant a room in the University halls of Residence.

Applicants who contravene the regulations governing the organization, conduct and discipline of students will face disciplinary action, which may even lead to expulsion from the University. This form MUST be returned whether filled or not together with other admission documents.

Name.....

Gender..... Date of Birth:

Nationality.....

Place of Birth;Sub-County..... County

ID.NO..... Passport No.....
(Please attach photocopies of relevant pages)

Student Reg. No

Place of residence of Parents;

County.....Sub-County..... Town/Village/Estate.....

Name of Chief

School where registered.....

Year of study.....i.e. 1st,2nd,3rd,4th

Do you have any special need(s)? YES/NO.....

If yes, state the nature and level of special need(s).....
(To be confirmed and signed by a qualified health practitioner from a Government Hospital)

Mailing Address.....

Signature of Applicant.....Date.....

NOTE:

Accommodation fee is **ONLY** applicable to students at **Main Campus** who reside within the University's hostels.

Accommodation fee	Ksh. 3,900/- Per Semester (Optional)
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SECTION B

TO BE FILLED BY THOSE WHO DO NOT REQUIRE ACCOMODATION

I will not need to be accommodated in the university Hall of Residence while perusing the course I have been admitted to because I have alternative accommodation at;

.....Area/Estate in Town.....

Sub-County..... County

Signature of student.....Date.....

SECTION C

PARENT/GUARDIANS

Name of parent /Guardian.....

If Guardian-nature of relationship.....

Address.....

Profession,

Signature of Parent/Guardian.....Date.....

**SOUTH EASTERN KENYA UNIVERSITY
ACCOMMODATION DECLARATION**

WHERE AS I,, holder of National Identity card/passport Number and of Post office Box Number Code in the republic of Kenya has been admitted to South Eastern Kenya University for Undergraduate studies, AND WHERE AS I fully recognize that the said University is under no obligation but will endeavor to secure accommodation for me in its Halls of Residence during my period of study at the said University, **NOW I** **HEREBY SOLEMNLY DECLARE** as follows:-

1. That **I SHALL NOT** demand accommodation in the University Halls of Residence,
2. That in the event University being able to secure me accommodation, I shall be free to reject or, without any pre-condition ,accept such accommodation as it may be secure for me, which freedom will be exercised in cognizance of the stipulation in (3) and (4) below,
3. That having rejected the university accommodation, I shall find my own alternative accommodation at my expense,
4. That, having accepted the University accommodation, I shall be bound to utilize such accommodation as the University may from time to time direct; I understand further that my conduct in the utilization of such accommodation shall henceforth be bound by the Rules and Regulations governing the conduct of students of South Eastern Kenya University
5. That I understand and accept that the University accommodation referred to in this declaration may consist of shared facilities including double-decker beds,
6. That this declaration has been endorsed by many Parent/Guardian, who has appended his/her signature here below:

PARENT/GUARDIAN; Name.....

Signature.....**Date**

DECLARED this.....**Day of****20**.....

Signature.....

Witnessed by.....

NOTE:

Accommodation fee is **ONLY** applicable to students at **Main Campus** who reside within the University's hostels.

Accommodation fee	Ksh. 3,900/- Per Semester (Optional)
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IMPORTANT INFORMATION ON UNIVERSITY PROCEDURES AND PROCESSES

DEFERMENT OF ADMISSION

An applicant who for any reason is unable to take up the offer of admission will be required to inform the Academic Registrar (AR) by either filling in Form J1/1B of the Joining Instructions or writing directly to the Academic Registrar (AR). This information should reach the Academic Registrar (AR) at least one week prior to the date of registration. An applicant will be required to apply to defer admission on an annual basis but after the second year the offer of admission will lapse and the applicant will be required to re-apply afresh for admission. It is important that an applicant who defers admission ensures that he or she receives an official letter of deferment of admission from the Academic Registrar (AR). An applicant who fails to inform the Academic Registrar (AR) of his/her deferment of admission will be deemed to have forfeited his/her position and will be deregistered from the course admitted to.

STUDENT IDENTITY CARD

After the registration formalities, every student is issued with a Student Identity Card bearing his/her picture, name, registration number, the School, the course and the duration. The Student Identity Card allows easy identification of students and enables them to access various University services (e.g. the library, the student health clinic, the halls of residence, etc). Every student must ensure that they have their Student Identity Card at all times and that the card has the correct information and is valid for the duration the student is in the University.

PROCEDURE OF REPLACING STUDENT IDENTITY CARD

A student who loses his/her Student card will be required to report the loss to a police station and acquire an abstract. With a copy of the police abstract, they will also be required to report the loss to the Office of the Academic Registrar (AR) from where the replacement will be processed.

Replacement charges payable by the student will be as determined by the University from time to time.

TEMPORARY WITHDRAWAL

If for any reason a student who is already registered for a particular course has to leave the course for a particular period, the student will be required to apply to the Academic Registrar (AR) for temporary withdrawal. All applications for temporary withdrawal must be endorsed by the Dean of the respective School/Institute and must state the reasons for and the duration of such withdrawal. Any student who withdraws from a course without seeking appropriate authority will be deemed to have absconded from the course and will therefore be de-registered from the course.

INTER/INTRA-SCHOOL TRANSFERS

Inter/Intra-School transfers are processed within the first three weeks of the semester.

Students should note that transfers are only offered on two conditions if;

1. There is a vacant place in the intended destination School or Institute.

2. The student meets the requisite admission criteria for the particular course.

In addition, merit is used as criteria for transfer and that all applicants to a particular course will be ranked and allocated the vacant position on merit. Students who will have succeeded in their application for transfer will receive an official letter of transfer from the Academic Registrar (AR) and will be expected to report and register in their new courses latest by the fourth week of the semester. It is important for students to note that all Inter/Intra-School transfers are subject to approval by the Deans Committee and that once the transfers have been approved the exercise is closed and no late applications or appeals are considered.

ABSENCE DUE TO ILLNESS

A student who misses any lectures, practical(s), Continuous Assessments Tests (CATS), examinations etc. due to illness, must inform in writing the lecturer concerned, the Chairman of Department and the Dean of the School of such absence as soon as is feasibly possible.

NOMINAL ROLL

The Nominal Roll is a record of students registered in each degree programmed every semester/year. It gives important details on the student as well as recording the progress of the student from semester to semester (and yearly). It is important for every student to ensure that he/she signs the nominal roll in the Dean's office of their respective School at the beginning of each semester and to ensure that the information given in the nominal roll is correct and up to date.

COURSE/SUBJECT REGISTRATION

Every student is required to register for the courses/subjects he will undertake ONLINE from the Student portal at the beginning of every semester (first three weeks). The student must ensure that the registration is complete and units registered are approved.

It's the responsibility of individual student to ensure that the units registered bare the correct course codes.

EXAMINATIONS PROCESSES AND PROCEDURES

i) Rules and Regulations

Examinations are very important component of a student's academic life and students are expected to familiarize themselves with examination rules and regulations in the courses they have chosen and that they have fulfilled all the examination requirements in each semester.

ii) Registration

At the start of each semester (within the first three weeks) every student must register for courses and the examinations that they are due to take during that semester ONLINE. It is important that students get the right information from their respective Schools/Institute on the examinations they are expected to take in each semester.

iii) Attendance

Students should note that they are required to attend all courses they are registered in and to take the requisite continuous assessment tests in those courses in order to be allowed to sit the end of semester examinations.

iv) Problems

A student who experiences a problem, which is likely to affect his/her examination performance (i.e. sickness, bereavement etc.) must report such problems in writing to the chairman of the department offering the courses the student is taking, and to the Dean of the School. Any problem that is reported after the examination results are known will not be acceptable for examination appeals.

v) Examination cards

Every student who is registered for University examinations must be issued with an examination card by their respective School. This card must be produced at each examination sitting.

vi) Lateness

Lateness to examination venues will not be tolerated and no student will be allowed to enter an examination 30 minutes after the start of an examination, and also no student will be allowed to leave the examination room during the last 30 minutes of the examination.

vii) Cheating

Any student caught cheating in examinations e.g. by copying, having or making reference to unauthorized materials; communication to other students verbally or through other means will be expelled from the University and shall not be eligible for admission to any other programme of the University. Students are advised to ensure that at no time do they carry authorized materials such as notes, books, handbags, mobile phones e.t.c. into the examination rooms.

The penalty for cheating in examination is **immediate suspension** followed by **EXPULSION** as per the University statutes XXVII.

viii) Missing an examination

Missing an examination without good cause is a serious offence. Misreading of examination timetables is not taken to be a good cause of missing examinations and it's therefore not condonable.

ix) Answer booklets

Students must not take answer booklets from the examination rooms.

x) Examination results

Provisional examinations results may be obtained from the respective office of the Dean of School.

xi) Academic transcripts

Academic transcripts are available at the end of each academic year and are issued on application by the Academic Registrar (AR).



SOUTH EASTERN KENYA UNIVERSITY
STUDENT ENTRANCE MEDICAL EXAMINATION

NAME: _____

REGISTRATION NUMBER: _____

PROGRAMME: _____

IMPORTANT:

**2 Colored Passport
Size Photographs**

It is a University requirement that all students joining the University **MUST** complete **Part I** of this form. Thereafter he/she must complete **Part II** with assistant of a qualified and registered medical doctor. **Part III** will be filled by examining doctor who will thereafter print on the form his full name and medical Practitioners and Dentist Board Registration Number.

The completed form **MUST** be submitted to the office of the Senior Medical Officer, South Eastern Kenya University, P.O. Box 170- 90200, Kitui on or before the time of registration for further appropriate action.

Any student seeking medical treatment at the University clinic **MUST** identify himself/herself using Students' Identity Card.

The students are eligible for outpatient services at the University Clinic only. Those requiring hospitalization for further specialized care, are referred to Kitui Level 5 Hospital.

Please note that the medical services are provided only when the students are on session. Privately sourced medical services outside the University Clinic will not be honored or paid for by the University.

For full information regarding the Students' Medical Scheme, please check on the Student Information Handbook

PART 1:

Surname: _____ Other Names: _____

Sex: _____

Date of Birth: _____ Place of Birth _____

Nationality: _____ Marital Status: _____ No. of Children: _____

Name of Parent/Guardian/Next of Kin: _____

Postal Address: _____

Telephone No (Home): _____ Office: _____

PART II: (To be completed by the student with the doctor's help)

Have you ever been admitted into hospital? _____

If so, when and for what illness _____

Have you ever suffered from any of the following? _____

Allergy	Yes/No	Infectious Mononucleosis	Yes/No
Anemia	Yes/No	Asthma	Yes/No
Back pains	Yes/No	Bilharzia	Yes/No
Bladder Problems	Yes/No	Chest Infections	Yes/No
Diabetes Mellitus	Yes/No	Epilepsy	Yes/No

Jaudice/Hepatitis	Yes/No	Peptic Ulcer	Yes/No
Mental illness	Yes/No	Poliomyelitis	Yes/No
Severe headaches	Yes/No	Surgery	Yes/No
Thyroid disease	Yes/No	Tuberculosis	Yes/No
Eye problem	Yes/No	Speech problem	Yes/No
Heart disease	Yes/No	Hearing problem	Yes/No
High blood pressure	Yes/No	Sexually transmitted disease	Yes/No
Blood transfusion	Yes/No	Irregular menstrual periods	Yes/No
HIV/AIDS infection	Yes/No	Are you on any treatment now?	Yes/No

If the answer to any of the above is YES, please give details _____

Who's your doctor? _____

Any other medical cover? _____

FAMILY MEDICAL HISTORY:

Has any member of your family suffered from any of the following?

Diabetes mellitus	Yes/No	Heart disease	Yes/No
Bronchial asthma	Yes/No	High blood pressure	Yes/No
Mental illness	Yes/No	Sickle cell disease	Yes/No
Tuberculosis	Yes/No		

SIGNATURE _____ DATE _____

AUTHORIZATION STATEMENT

I hereby authorize any doctor, hospital, clinic or medical provider, any insurance company or any company, institution any other person who has any record or information about me and/or any of my family members to provide University with complete information including copies of their records with reference to my sickness or accident, any treatment, examination, advice or hospitalization. Any photocopy of this authorization shall be taken as the original copy.

PART III: (To be completed by the Examining Doctor) _____

Immunization _____ (Attach copy of immunization record).

Height _____ Weight _____ Any deformity _____

Visual Acuity _____ LE 6 _____ RE 6 _____

Hearing _____ Nose _____ Throat _____

Lymphatic glands _____

CARDIOVASCULAR SYSTEM:

Pulse _____ /minute Regular/irregular _____

Heart sounds _____ Blood pressure _____

RESPIRATORY SYSTEM:

Clinical findings _____ Respiratory rate _____

Percussion _____ Auscultation _____ CXR, X-

Ray and report should be submitted together with the form. **JI/3**

ALIMENTARY SYSTEM:

Teeth _____ Tongue _____ Abdomen _____

GENITO-URINARY SYSTEM:

Urethral discharge _____ L.M.P _____ Uterus _____

Urine _____ S.G _____ Albumin _____ .Sugar _____

Deposit _____

HIV test _____

COMMENTS BY THE EXAMINING DOCTOR:_____

DOCTOR'S NAME (Printed) _____ SIGNATURE _____

MEDICAL PRACTITIONERS & DENTISTS BOARD REG. NO. _____

DATE _____ Official Stamp _____

PART IV:**COMMENTS BY THE UNIVERSITY SENIOR MEDICAL OFFICER:**

Special remarks _____

Does the student require any special medical needs? _____

SENIOR MEDICAL OFFICER
UNIVERSITY CLINIC _____

DATE _____

SOUTH EASTERN KENYA UNIVERSITY

MEDICAL CONSENT FOR MINORS

EMERGENCY OPERATIONS

This applies to students who are minors (i.e. under 21 years of age)

Name of Student _____

Date of Birth _____

Course Admitted to _____

Registration No. _____

Approval of your parents (or guardian) is required for the Vice Chancellor of the South Eastern Kenya University to give consent on their behalf, for any emergency operation to be carried out on you should a situation calling for such an operation arise. Parents (or guardians) are therefore required to complete the consent from below if you are less than 21 years of age.

FORM OF CONSENT

I agree that the Vice Chancellor of the South Eastern Kenya University may give consent for any emergency operation being performed on _____ (insert name), if it has not proved possible to contact me in time.

Name _____

Signed

Relationship _____

Address _____

Telephone _____

Date _____



SOUTH EASTERN KENYA UNIVERSITY

HEALTH SERVICES

STUDENT MEDICAL SERVICES

1. Students are entitled to basic outpatient medical services at the University Health Unit Only. This includes:
 - General outpatient consultation
 - Basic laboratory investigations
 - Prescribed medication from the University Health Unit
 - Surgical procedures under local anaesthesia
 - Reproductive health services
 - HIV care and treatment services
 - Antenatal Clinic services.
 - Radiological investigations(at the County Hospital)-Limited to X-ray and ultra sound only
2. Referrals will be made to the Kitui County referral hospital for eligible outpatient services not available at the University Health Unit. **NB: The University shall not pay for bills incurred from self-referral to the County Hospital.**
3. Maternity Services are not provided by the University; Students should make own arrangements for transport to their facilities of choice for delivery
4. Dental services are limited to tooth extraction only
5. Optical services are limited to basic outpatient eye treatment
6. Specialist medical services (Consultants Clinics) are not covered by the University
7. Students on follow up for Congenital and Chronic conditions are advised to make own arrangements for continuity of care with their specialists
8. Students residing out of the University's Main Campus should make their own transport arrangements to the Health Unit
9. Inpatient medical services are a responsibility of the Parent/guardian NB: Students are encouraged to have NHIF cover to facilitate admission

No treatment shall be obtained at any other facility apart from the Kitui County referral hospital except with the express authority of the Vice-Chancellor.



1. FEES STRUCTURE

Fees structure is downloadable from the University website www.seku.ac.ke. Under **ADMISSIONS** or by clicking the link <https://www.seku.ac.ke/student-fees-structure.html>.

NOTE:

You are advised to access the correct fees structure for your programme.

GOVERNMENT SPONSORED STUDENTS PROGRAMME (GSSP)

2. UNIVERSITY ACCOUNT NUMBER(S) FOR FEES PAYMENT

ACCOUNT NAME	BANK	BRANCH	ACCOUNT NUMBER
South Eastern Kenya University	National Bank of Kenya	SEKU	01021052862000
South Eastern Kenya University	Equity Bank Ltd.	Kitui	0720295920757
South Eastern Kenya University	Barclays Bank of Kenya	Kitui	2021558152
South Eastern Kenya University	Co-operative Bank	Kitui	01129300544600
South Eastern Kenya University	Kenya Commercial Bank	Kitui	1127693166
South Eastern Kenya University	Family Bank	Kitui	072000038445