	**THE KENYA NATIONAL EXAMINATIONS COUNCIL**

KNEC/GEN/EA/EM/KCPE/REG/005/2022/REV 7.1

2022 KCPE EXAMINATION ENTRY FORM FOR PRIVATE CANDIDATES

(TO BE COMPLETED IN DUPLICATE)

A. **TO BE COMPLETED BY THE CANDIDATE**

1. **FULL NAME** (in block letters):
   a) Surname: Mr./Mrs./Miss_____
   b) Other names:_____
   c) Address:_____
   _____
   _____
2. Date of Birth_____
3. Religion: _____
4. Occupation_____
5. Educational standard reached in school: _____
6. State the adult class you are attending and duration you have attended_____
7. Candidate's signature: _____Date:_____

B. **TO BE COMPLETED BY THE SUB-COUNTY ADULT EDUCATION OFFICER**

Only if he/she is satisfied that candidate has attained the level of competence required for KCPE.

1. Candidate's ID card No. (Where applicable): _____
2. Registration fees paid – Kshs. : _____
3. Receipt No. (KNEC/P. No.): _____
4. Candidate's Index No.: _____

Name of Sub County Adult Education Officer: _____

Signature: _____ Date: _____

Mobile No: _____

OFFICIAL STAMP: