

KENYATTA UNIVERSITY TEACHING, REFERRAL & RESEARCH HOSPITAL (KUTRRH)

P.O. Box 7674 - 00100 GPO NAIROBI, KENYA

Website: www.kutrrh.go.ke

APPLICATION FOR EMPLOYMENT FORM

Please complete all sections of this form as appropriate in BLOCK letters. Scan and apply online via www.kutrrh.go.ke/careers. Address applications to:

The Chief Executive Officer
Kenyatta University Teaching, Referral & Research Hospital (KUTRRH)
P.O Box 7674 – 00100 GPO Nairobi, Kenya

For all applications, please indicate the subject as follows: - JOB APPLICATION – [JOB REFERENCE NUMBER] (Do NOT attach copies of certificates and testimonials

1. Vacancy Applied For
Vacancy/ Post:
Job Reference No:
2. Personal Details of the Applicant
Name:
3. Applicants from the Public Service
3. Applicants from the Public Service
Ministry/ State Department/ County/ Other Public Institutions: Station: Personal/ Employment No: Present Substantive Post: Job group/ Scale/ Grade: Date of Current Appointment (dd-mm-yyyy). Terms of Service: Permanent & Pensionable Contract Other, please specify
4. All other applicants
Current employer (where applicable):

(dd-mm-yyyy)

5. Other Personal Details										
•	Have you ever been convicted of any criminal offence or a subject of probation order? Yes No									
Have you ever been dismissed or otherwise removed from employment? Yes No If Yes, State reason (s) for dismissal/removal										
(Declaring the above information will not necessarily debar an applicant from employment in KUTRRH. Each case will be considered on its own merit)										
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6. Acade	emic Qu	alifications (St	arting with the	e highest qua	alification),					
Yea From	Year University/ High school			Award/ Attainment (e.g. Masters, Bachelors, KCSE)		Course/Programme (e.g. PhD, MSc, BA, O' Level)		ject s,	Class/ Grade	
7. Ongoi	ing Acad	demic/Professi	onal Studies (I	f currently u	indertaking a	course	2)			
Start	Expected Institution Bachelors, Hi graduate Dip		Award/ Attaini (e.g. PhD, Mas Bachelors, High graduate Diplo Diploma, Certi	sters, Course/Programm her/Post (e.g. PhD, MSc, oma, BA, O' Level)		(e.g	cialization/Subject g. Econ, Maths, iology etc.)	Curren level c studies	f (Full-	
8. Profes	ssional/	Technical Qua	lifications/ Cer	tifications R	elevant to the	e Post.	(Starting with t	ne high	est)	
Year From To		Institution		Award/ Attainment (e.g. Higher Diploma, Diploma, Certificate)		Specialization/ Subject (e.g. Human Resource, Engineering, Counselling, Medicine etc.)			Class/ Grade	
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FIOIII	То			Certificate)		меак	ne etc.)			

O. Dalamati Carran	d = ctotal and addition to a control	on the Circ(C) Week	
Year To	d Training attended Lasting not Le University/ College/ Institution	Name of Course	Details and duration
10. Current Registration	on/ Membership to Professional Bo		
Professional Body	Membership/ Registration	No. Membership type (e.g. Ass Full etc.)	ociate, Date of Renewal
11. Employment Detail	ls - where applicable (starting witl	n the current or most recent)	
11. Employment Detail Year From To	ls - where applicable (starting with Designation/ Position	Job Group/ Grade/ Scale/ Gross Monthly Salary (Ksh.)	Ministry/ State Department/ Organization
Year		Job Group/ Grade/ Scale/	Ministry/ State Department/
Year		Job Group/ Grade/ Scale/	Ministry/ State Department/
Year From To		Job Group/ Grade/ Scale/ Gross Monthly Salary (Ksh.)	Ministry/ State Department/
Year From To	- Designation/ Position	Job Group/ Grade/ Scale/ Gross Monthly Salary (Ksh.)	Ministry/ State Department/
Year From To	- Designation/ Position	Job Group/ Grade/ Scale/ Gross Monthly Salary (Ksh.)	Ministry/ State Department/

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13. Please give details of your abilities, skills and experience which you consider relevant to the position applied for. This information may include an outline of your most recent achievements and your reasons for applying for this post.
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14. Referees (People who have interacted with you professionally)
1. Full Name:
Occupation:
Address:
Mobile No: E-mail address:
Period for which the referee has known you:
2. Full Name:
Occupation:
Address: City/Town: City/Town:
Mobile No: E-mail address:
Period for which the referee has known you:
3. Full Name:
Occupation:
Address: Postal Code: City/Town:
Mobile No: E-mail address:
Period for which the referee has known you:
15. Declaration
I certify that the particulars given on this form are correct and understand that any incorrect /misleading
information may lead to disqualification and/or legal action.
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Date: Signature of the Applicant:
(dd-mm-yyyy) (Signature of the Applicant)
(ad min ////)
Please take note that all communication to potential candidates is specifically through KUTRRH's official
emails/ telephones.
emails/ telephones.
Any form of converging will load to immediate discussification
Any form of canvassing will lead to immediate disqualification.
KUTRRH is an Equal Opportunity Employer

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