

VICTORY DIGITAL COLLEGE

P.OBOX 321-00619 VILLAGE MARKET Tel: 0704 234 635

Ruaka Branch	Gachie Branch	Kitui Branch
ADMISSION / REGISTRATIO	N FORM	
Please complete this form accura	ately by ticking/filling the	relevant parts.
 Full Names (as on your ID) Age Gender: Male Femal Address Cell Phone 	e 🔲	
6. Reporting Date7. Parent/Guardian Name8. Which faculty/course are your	Residence Tel:	
A. 16 Computer Packages B. Graphics design C. Computerized Accounts D. Web design	E. Computer Progra F. Mobile app & MI G. Digital Marketing H. CPA / ATD	IS Dev. J.ICT Diploma Certificate Cont
	Others	
term indicated. I agree that I am be admission requirements. I agree to I certify that this information is co	ound by the college's regul the release of any transcri mplete and accurate. I undo	d that this application is for admission only for ations concerning application deadlines and pts and certificates to this institution score reports. erstand that making false or fraudulent statements isplinary action, denial of admission and
the College should any informatio admission. I understand that the ap	n change prior to my entry oplication fee i submit with 4 days without any notice e terms listed above?	ory Digital College and the rules and regulations of into the college, i will notify the office of this application is a non-refundable fee. will lead to disqualification of admission.
Student Signature	Regis	strar