COUNTY GOVERNMENT OF NAKURU
COUNTY ASSEMBLY OF NAKURU
OFFICE OF THE CLERK TO THE ASSEMBLY

TEL:020-3500033
Email: clerk@assembly.nakuru.go.ke
Website: www.assembly.nakuru.go.ke

COUNTY ASSEMBLY
P. O. BOX 907-20100
NAKURU

APPLICATION FOR INTERNSHIP FORM

Please complete this form in BLOCK LETTERS and submit to the Clerk/Secretary, County Assembly Service Board, P.O.Box 907-20100 NAKURU.

1. Full Name .....
2. Date of Birth.....
3. Identity Card Number.....Gender: Female/ Male
4. KRA Personal identification Number (PIN).....
5. Certificate of Good Conduct Number **(can be provided at a later date if not available)**.....
6. Postal address..... Postal code..... Town.....
7. E-mail Address.....
8. Mobile Number.....
9. Home County..... Sub-county.....

   Ward.....
10. Ethnicity.....
11. Disability Status.....

12. Educational/Professional Qualifications. (Attach copies of all Certificates)

S/NO	EXAMINATION/ COURSE	UNIVERSITY/INSTITUTION/SCHOOL	YEAR OF GRADUATION/ COMPLETION	CLASS/GRADE

13. Directorate/Department of interest

……

I certify that the above information is true to the best of my knowledge.

Name ……

Signature ……

Date……