



Enhancing Urban Mobility

**Kenya Urban Roads Authority**

Barabara Plaza Mazao Road, Off Airport South Road

P.O BOX 41727-00100 Nairobi, Kenya

0717 105 233 / 020 801 3844/ 020 272 2222

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**INTERNSHIP PROGRAMME APPLICATION FORM**

Please complete this form in **BLOCK LETTERS** and submit to the Kenya Urban Roads Authority.

1. Full name .....
2. Date of Birth..... Identity Card Number.....
3. Gender: ☐ Female ☐ Male
4. Personal Identification Number (PIN).....
5. Certificate of Good Conduct Number.....
6. Postal Address .....Postal Code .....Town.....
7. E-mail Address.....
8. Mobile Number.....
9. Home County.....Sub-county.....
- 10.Ethnicity.....
- 11.Any form of Disability: Yes ☐ No ☐

If yes, please indicate the nature.....

**12.Educational/Professional Qualifications**

| S/No | Examination/Course | University/Institution | Year of Graduation | Class/Grade |
|------|--------------------|------------------------|--------------------|-------------|
|      |                    |                        |                    |             |
|      |                    |                        |                    |             |
|      |                    |                        |                    |             |
|      |                    |                        |                    |             |

13.Area of Interest..... (e.g.  
Engineering, Human Resources, Procurement, Finance, Surveying, Administration,  
Legal, Communication, Environment, Sociology)

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

Name: ..... Signature: .....

Date: .....

**Human Resource Management & Administration Department** (*Official use only*)

Checked & Received By:

Name: ..... Signature: .....

Date: .....