



# KENYA WATER INSTITUTE

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**NAIROBI**

## Alumni Registration Form

Kenya Water Institute (KEWI) would like to connect with its alumni, honour them and involve them in KEWI activities. In this regard, we are updating the alumni database. To help us facilitate this process, we request that you complete this form and submit it to the Director, KEWI using the above email address.

Title (Dr., Eng., Mr., Ms. other)		Surname	
First Name		Middle Name	
KEWI Admission Number:		E-mail Address:	
		Telephone No:	
Current Address	Box No.	Post Code	
	Town/City	County	Country:
Department		Area of Specialization	
Qualification gained (HDip, Diploma, Certificate, etc)		Year of Admission	Year of Graduation
1. ....		1. ....	4. ....
2. ....		2. ....	5. ....
3. ....		3. ....	6. ....
Name of Current Employer/Organization		Job Title	
If self employed (Tick)		Company/Business name	
Name of Professional Body (if any)		Signature	