

REPUBLIC OF KENYA



MINISTRY OF EDUCATION

STATE DEPARTMENT OF EARLY LEARNING AND BASIC EDUCATION

TRANSFER AND ADMISSION FORM

SECONDARY SCHOOL – TRANSFER FORM

PART A

Pupil Name..... Form .....

Present school .....

School to which transfer is requested.....

Reasons.....

PART B: To be completed by the Receiving Principal

I have/do not have a vacancy in Form .....

I have examined the application and discussed the same with the pupil and parent/guardian.

I accept/do not accept the pupil in school.

Name of Principal..... School .....

Signature ..... School stamp and date .....

PART C: To be completed by the Releasing school Principal

I certify that (name) ..... Form..... is a pupil in .....secondary school.

I am willing/not willing to release/clear the pupil.

Name ..... School .....

Signature ..... School stamp and date .....

PART D: To be completed by the Sub-County Director of Education for Inter sub-county schools.

i) SCDE of releasing sub-county

I do/do not approve the transfer

Reason .....

Signature ..... Office stamp .....

Date .....

**ii) SCDE of receiving sub-county**

I do/do not approve the transfer

Reason .....

Signature ..... Office stamp .....

Date .....

**PART E: To be completed by the County Director of Education for Inter county schools**

**i) CDE of current County**

I do/do not approve the transfer

Reason .....

Signature ..... Office stamp .....

Date .....

**ii) CDE of receiving County**

I do/do not approve the transfer

Reason .....

Signature ..... Office stamp .....

Date .....