



**JARAMOGI OGINGA ODINGA UNIVERSITY OF SCIENCE AND TECHNOLOGY
JOOUST CENTRE OF TECHNICAL, VOCATIONAL EDUCATION AND TRAINING
OFFICE OF THE REGISTRAR (ACADEMIC AFFAIRS)**

Tel. 057-2501804
email: academic@jooust.ac.ke

P.O. BOX 210 - 40601
BONDO

Date: _____

DECLARATION

I _____

National Identity Card Number _____ do hereby declare that I have read the Rules and Regulations Governing the Organization and Discipline of Students at Jaramogi Oginga Odinga University of Science and Technology, have understood its content and meaning and undertake to abide by them.

Signature of Applicant: _____

Admission Number: _____ **Date:** _____

AND WITNESSED IN THE PRESENCE OF PARENT/GUARDIAN

Name: _____

Relationship: _____ **ID/No.:** _____

Signature: _____ **Date:** _____