



# REPUBLIC OF KENYA

## COUNTY PUBLIC SERVICE BOARD

### APPLICATION FOR INTERNSHIP PROGRAMME FORM

Please complete this form in BLOCK LETTERS and submit to the County Public Service Board that has advertised internship opportunities.

1. Full name .....
2. Date of Birth .....
3. Identity Card Number ..... Gender Female  Male
4. Personal Identification Number (PIN) .....
5. Postal Address ..... Postal Code ..... Town .....
6. E-mail Address .....
7. Mobile Number .....
8. Home County .....
9. Sub-county .....
10. Ward.....
11. Disability Status .....
12. Educational/Professional Qualifications

S/No	Examination	University /Institution	Year of Graduation	Class/Grade

13. Area of Interest .....

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

Name: .....

Signature: .....

Date: .....