



THE KENYA NATIONAL EXAMINATIONS COUNCIL

“Quality educational assessment, credible certification”

KNEC/GEN/EA/EM/REG/KJSEA & KPLEA/2025/01

CANDIDATES REGISTRATION FORM 2025

LEARNER BIODATA

Candidates Full name:

Birth Certificate Entry Number:

Y.O.B UPI:

Assessment No.:

Special Needs ☐ None ☐ Blind ☐ Low Vision ☐ Deaf ☐ Physical Disability

Religious Subject

Language (Kisw/KSL)

Parents Details:

(By signing this form, your consenting to the use of the below personal data is for the purpose of capturing and conducting learner assessment and identification purposes. This data will be solely used for the registration and learner assessment at Grade 9.)

Parent/Guardian Full Name:

Contact Details: Sign:

Parents ID No.

Head teachers Declaration:

I hereby declare the information is true and shall be used for stipulated purposes only.

Name: Sign Date/Stamp
