



REPUBLIC OF LIBERIA
MINISTRY OF YOUTH & SPORTS
KLAY AGRICULTURAL AND VOCATIONAL TRAINING CENTER(KAVTC)



Klay, Bomi County
 Email: fredenucmassaquoi@yahoo.com
 Email: kavtc.tvet@yahoo.com
 Contact#: 0886589030/0777427758

STUDENT'S REGISTRATION FORM									
Last Name:			First Name		Date of Birth		Age		
Gender :	<input type="checkbox"/> Male	<input type="checkbox"/>	Female		County of Origin				
Education: Please check the box that best describes the highest level of education you have acquired to date:									
<input type="checkbox"/>	None	<input type="checkbox"/>	Up to Grade 6	<input type="checkbox"/>	Up to Grade 9	<input type="checkbox"/>	High School Graduate	<input type="checkbox"/>	Started College
Address					Contact Number(s)	Emergency Contact			
						Name:			
						Number:			
TWO References									
Last Name:			Address						
First Name:									
Telephone Contact									
Last Name			Address						
First Name									
Telephone Contact									

Name: _____
 Please Print Clearly Signature Date