APPENDIX VI

NCPWD **REASON FOR** S/NO NAME TSC NO. GENDER SUB MARKS TP KCSE YEAR MOBILE HOME GRA OF NO. COUNTY SCORED MEAN NO. COUNTY NON GRADE APPEARANC DE GRAD. E

We confirm that the information entered above is correct to the best of our knowledge.

SUB-COUNTY SELECTION PANEL SECRETARY

| Name | | _TSC No |
|--|-------------|---------|
| Sign | _ Mobile No | Date: |
| SUB-COUNTY SELECTION PANEL CHAIRPERSON | | |
| Name | | _TSC No |
| Sign | Mobile No. | Date: |