



**REPUBLIC OF KENYA**  
DEPARTMENT OF IMMIGRATION

**APPLICATION FOR AUTHORITY  
TO CONDUCT RESEARCH IN KENYA BY NON-KENYANS (1990)**  
(To Be Completed In Block Letters)

**PART II (TO BE COMPLETED BY THE APPLICANT)**

Surname of the Project Leader  Other Names

Passport Number  Issued at  Date

Permanent Residential Address

Postal Address

Address while staying in Kenya (if applicable)

Contact Number in Kenya (Home)  Contact Number in Kenya (Mobile)

Age  Sex  Male  Female Nationality

Qualifications

(PLEASE ATTACH ABOVE DETAILS FOR OTHER RESEARCH STAFF AND THEIR CURRICULUM VITAE)

	Referee 1	Referee 1
Name		
Address		
Occupation		
Signature		
Date		

Have you applied for authority to conduct research in Kenya before?

Yes  No

Title of the research (if any) previously applied for:

The application was approved/rejected *vide* the Ministry's letter

Ref

Date

Have you sought affiliation with a Kenyan institution approved for affiliation purposes?

Yes  No

If yes, please give name of institution

If no, you should seek research affiliation with a relevant approved Kenyan institution and provide name of institution (a list of institutions approved for affiliation is appended). Affiliation is mandatory before a permit can be issued. It is the responsibility of the researcher to look for such affiliation.

*Note: Affiliation is not required for Kenyans sponsored by Kenyan sources or under approved bilateral or multilateral aid schemes.*

University/foundation/organization etc. Under which the research project is being undertaken:

Sources of Finance

Amount (KES)

Title of the research project

Purpose of the research (e.g. Msc, phd, Thesis etc.)

Field and scope of the research

Theme/hypothesis of the research

Methodology of the research

List major equipment to be brought to Kenya by non-resident researchers

Location of the fieldwork:	
Location/Division	
District	
Province	

*Please note that the government of Kenya may require alternative location*

Estimated period of the project	From	To

I will need access to the following public records:

I will need to interview the following government officials:

I need to interview members of the public whom i will select as follows:

*(Please incorporate details of sampling procedures, if relevant, in the description of your project)*

I intend to use the attached copies of questionnaire(s)

***Declaration***

I certify that i have read and understood the conditions given in parts i and ii. I do agree to abide by them as required and that the information given by me in part II is correct to the best of my knowledge.

I  (name) do agree to deposit at least 4 copies of a final comprehensive report on my research project with the government of Kenya within a year from the date indicated as the completion date of the project in the section '*Estimated period of the project*' of part II above.

Signature

Date 

DD	MM	YY

PART III - (FOR OFFICIAL USE BY AFFILIATING INSTITUTION)

Name of the affiliating institute

Recommendation by the Head of the Institution of Affiliation

Name of the Official

Name of the Official

Signature

Date

DD MM YY

PART IV - (FOR USE BY N.C.S.T)

Comments by the relevant Government Ministry/Department

Sub-Committee's recommendation

Chairman of Sub-Committee

Date

DD MM YY

Approved

Not Approved

Chairman of N.C.S.T Research Committee

Date

DD MM YY

PART V - (FOR OFFICIAL USE ONLY)

Comments by the relevant Government Ministry/Department

Sub-Committee's recommendation

Chairman of Sub-Committee

Date

DD	MM	YY
<input type="text"/>		

Approved

Not Approved

Chairman of N.C.S.T Research Committee

Date

DD	MM	YY
<input type="text"/>		