

TEACHERS SERVICE COMMISSION EDUCATION MANAGEMENT INFORMATION SYSTEM(EMIS) TEACHER TRAINING COLLEGE DATA RETURN FORM 'A' YEAR ______TERM

GENERAL GUIDELINES AND INSTRUCTIONS

- 1. Read the instructions on the form very carefully before completing.
- 2. This form is to be completed by the head of the institution. Note: Information provided in this form should be correct. Provision of incorrect information may lead to disciplinary action.
- 3. All parts of the form must be filled.
- 4. The information should be captured for the month of May.
- 5. The form is to be completed in triplicate. The institution should retain the triplicate while the original and duplicate be forwarded to TSC County Director by 31st May.
- 6. For any query regarding this form contact the TSC County Director.

DISTRIBUTION

- (i) Principal's copy to be retained in the Institution.
- (ii) TSC Copy through TSC County Director
- (iii) County Director's Copy

I INSTITUTION II	DENTIFICATION		II INSTITUTION CHA	RACTERIST	rics		III SUMM	IARY DATA					_		
1. Name of Colleg	e		(Indicate as Applicable	e)									Enro	lment	,
2. TSC STATION (CODE	3. Address and		_			S	Staff Es	tablis	hm	ent	1	No. c	f Train	ees
(Please give IPPD	code)	(a) Postal Code	1. Status	1. Public			Name of I	Department	CBE AT	T.O.D	Under	Over	Male	Female	Total
				2. Private					15hrs/wk						
4. REG NO.									Minimum						
		E-mail	Category	1. Male			1. Admini	stration							
5. No. of courses	as per Reg.			2. Boarding	8		2								
Certificate				3. Day/ Bo	arding		3								
							4								
		(b) Current					5								
		Tel. Code and No.	3. College Type				6								
6. County				1. Male			7								
				2. Female			8								
7. District		Fax		3. Mixed			9								
							10								
8. Consitutency							11								
							12								
9. Division		Mobile	5. Name of Sponsor												
							TOTAL								
10. Zone						SUI	MMARY OF	CURRENT S	TAFFING P	OSITIO	N PER	JOB (ROUP		
					R	Q	Р	N	м	L	K	J	н	тс	OTAL

IV. ST	AFF ESTABLIS	HMENT																	
DEPA	RTMENT NAME									•••									
			Name	sex m/f	Date of Birth dd/mm/yy	Nationa	Terms of Service	Date of First Appoint ment	Grade	Date Appointed to the Current	Qual. Code		Religio	Teaching Subjects (Currently Taught)		Department Name	Univ/College of Study(most current)		Signature /Reason for absence/Type of Leave)
														Major	Minor				
1														iviajoi	IVIIIOI				
2																			
2	•																		
3																			
4																		1	
5																			
6	5														1				
7	'														1			1	
8	3																	1	
9															1	1			
10)																		
11																			
12																			
13																			
14																			
15																			
16																			
17																			
18																			
19																			
20																			
21																			
														TOTAL HOURS TAU	JGHT IN THE DEPT.	PER WEEK =			
Nation	alitv		Terms of Service		Grad	e Code							acation ode		Designation C		<u>Religion</u>		eason for /Type of Leave
1. Ken			1.Permanent	,	TCTT III		Н	16	LECTUR	ER	L	1. Phd			1. Principal		1.Catholic	1. Sick Leav	
2. Othe	er		2.Contract	2	2 ATS IV		Н	17	ATS I		L	2. Masters			2.DeputyPrincipal		2.Protestant	2. Study Le	ave
			3.Temporary	3	3 UTTT		Н	18	SNR. GF	RAD	М	3.Degree			3.Dean of Students		3.Hindu	3. Maternity	
					UTGRAD		J	10	SNP AF	PR. TEACHER	N/I	4.H. Dip./Di	in Tech. Ed		4.Dean of curriculum		4.lslam	4. Special L	eave
					TCTT II		J			CTURER		5.H. Diplom			5.Registrar		5.Other	5.Compass	
					S TDTT III		J		PRINCIP			6. Diploma/		d.	6.Guidance & councell	ing co-ordinator		leave	
				7	ATS III		K	22	PGAT II			7.Diploma T			7.Teaching practice Co			6.Leave of A	Absence
				8	з тстті		J	23	B PAT II		N	7. Tech. Ce	ert		8. HoD			7.Annual lea	ave
					TDTT II		K		P. LECT			8. PI			9.Principal Lecturer			8.Leave out	side Kenya
					ATS II		K		PRINCIP	PAL II	N				10.Senior Lecturer				
					GAT II		K		PGATI		P P				11. Lecturer				
					2 TDTT I 3 ASS.LECTURE		L R		PAT I	PAL I	P P				12.Asst. Lecturer				
									SPGAT		Q								
									CPGAT		R								

	Main Courses	Min. Entry	Duration	Classes &	No. of	Traine	es			No. of Hou	urs per Wk	ζ.	Teachers Summary				
	Offered in the Dept	requirement			1st yr		2	2nd yr		1st	2nd	Total	CBE	TOD	Under	Over	Remarks
				Classes	Students		Classes Students		yr	yr		at 15					
					М	F		М	F			Hrs/wk					
1										1							
2																	
3																	
4																	
5																	
6																	
7																	
8																	
9																	
10								-							_		
11								1									
12																	
13															_		-
14				1	+	-	1	+	-	 					-	1	
15				+	1			+		1				+			
16					1												
17					1			+		+				-			
18 19			+	1	+			+		+				+		1	
20					-	+											

3. Summary of Understaffing or Overstaffing in the Department

Understa	ffing	Overstaffing	
NO.	Subject and Qulification Level	NO.	Subject and Qualification Level

S/No.	TSC No.	ID NUMBER	Name	sex m/f	Date of Birth dd/mm/yy	Nationality Code	Terms of Service	Date of First Appoint ment dd/mm/y y	Grade	Date Appointed to the Current grade dd/mm/yy	Qual. Code	Designati on Code	Religio	Teaching Subjects (Currently Taught)		Departm ent Name	Univ/Coll ege of Study(most current)	Hrs taught	Signature /Reason for absence/Type of Leave)
														Major	Minor				
22																			
23																			
24																			
25																			
26																			
27																			
28																			
29																			
30																			
31																			
32																			
33																			
34																			

INSPECTION		EXAMINATION					
Last date the School was Inspected.							
Type and level of inspection	(Tick as Applicable)	1. PTTC Results	No. of Candindates	Percentage Passed	NO. of Candidates who Passed	Special Reports	
1. Type	2. Level	a) Last Year				No. of Teachers who cannot	teach
a) Routine/Advisory	a) National	b)Previous Year				full load:	
b) Audit	b) Provincial			pos.	out of	Reasons:	(a) Sickness
c) Investigative	c) District	2.a) Position in the Country last year				(Tick as applicable)	(b) Disability
d) Any other	d) Divisional	b) Position in the Country Previous Year					(c) Other (Specify)
(specify)	e) Zonal					No. of periods lost due to ab	osenteesim

Title prof captures any Traceful who is undergoing any course. The Information will guide the Commission on future projections and planning. 1	VIII. Study Programmes This part captures any Teach		he information will guide the	Commission on future proi	ections and planning.		
List Of Courses Areas Of Specialization 1 H. Diploma 1.Technology					Date Expected to complete	Area of Specialization Code	
List Of Courses Areas Of Specialization 1 H. Diploma 1.Technology	1						
List Of Courses Areas Of Specialization 1 H. Diploma 1.Technology	2						
List Of Courses Areas Of Specialization 1 H. Diploma 1.Technology	3						
List Of Courses Areas Of Specialization 1 H. Diploma 1.Technology	4						
List Of Courses Areas Of Specialization 1 H. Diploma 1.Technology	5						
List Of Courses Areas Of Specialization 1 H. Diploma 1.Technology	6						
List Of Courses Areas Of Specialization 1 H. Diploma 1.Technology	7						
List Of Courses Areas Of Specialization 1 H. Diploma 1.Technology	8						
List Of Courses Areas Of Specialization 1 H. Diploma 1.Technology	9						
List Of Courses Areas Of Specialization 1 H. Diploma 1.Technology	10						
1 H. Diploma 1. Technology 1. Tell time 2. Technology 3. Medical engineering 3. Tishers 2. Part time 3. MSC 3. Mechanical 3. Mec	10					I	
1. H. Diploma 1. Technology Administration 18. medical lab. Tech 27. Engineering maths 36. Medical engineering 1. Full time 2. Tech. ED 2. Education 10. Entrepreneurship 19. French/ German 28. Secretirial 37. Fishers 2. Part time 3. MSC 3. Mechanical 11. Special Education 20. Guidance and counselling 29. Food & beverage 38. Printing Technology 3. Open learning 4. MBA 4. Automotive 12. Business 21. Economics of Education 30. Hotel & managment 39. Graphic Arts & design 4. School based 5. Correspondence/ Dist. Learning 5. MED 5. Building 13. Electronics 22. Coomunication& Media 31. Health Science 40. Architecture Learning 6. Civil 14. Electrical 23. Library 32. Applied Biology 41. Telecommunication 7. Computer Science&engineering 15. Clothing 24. Chemical engineering 33. Applied Chemistry 42. mechatronics 43. Accounts 9. Education 17. Pharmacy 26. Economics 35. Aeronatical 44. Other 4. Other 4	<u>List Of Courses</u>	Areas Of Specialization	O. Education Diamina and				Mode of Training
3 MSC 3.Mechanical 11.Special Education 20. Guidance and counselling 29.Food & beverage 38.Printing Technology 3. Open learning 4 MBA 4.Automotive 12.Business 21. Economics of Education 30.Hotel & managment 39.Graphic Arts & design 4. School based 5. Correspondence/ Dist. 5 MED 5.Building 13.Electronics 22.Coomunication& Media 31.Health Science 40. Architecture			Administration				
4 MBA 4. Automotive 12. Business 21. Economics of Education 30. Hotel & managment 39. Graphic Arts & design 4. School based 5. Correspondence/ Dist. Learning 6 MPHIL 6. Civil 14. Electrical 23. Library 32. Applied Biology 41. Telecommunication 7. Computer Science&engineering 15. Clothing 24. Chemical engineering 33. Applied Chemistry 42. mechatronics 43. Accounts 45. Correspondence/ Dist. Learning 45. Clothing 24. Chemical engineering 33. Applied Phsysics 43. Accounts 45. Clothing 24. Chemical engineering 35. Aeronatical 44. Other 45. Clothing 4	2 Tech.ED	2.Education	10.Entrepreneurship	19. French/ German	28.Secretirial	37.Fishers	2. Part time
5 MED 5. Building 13. Electronics 22. Comunication & Media 31. Health Science 40. Architecture Learning 5. Correspondence/ Dist. Learning 4. Architecture 6. Civil 14. Electrical 23. Library 32. Applied Biology 41. Telecommunication 7. PHD 7. Computer Science & engineering 15. Clothing 24. Chemical engineering 33. Applied Chemistry 42. mechatronics 43. Accounts 43. Accounts 43. Accounts 44. Other 5. Correspondence/ Dist. Learning 5. Corresponden	3 MSC	3.Mechanical	11.Special Education	20. Guidance and counselling	29.Food & beverage	38.Printing Technology	3. Open learning
6 MPHIL 6.Civil 14.Electrical 23.Library 32.Applied Biology 41.Telecommunication 7 PHD 7.Computer Science&engineering 15.Clothing 24.Chemical engineering 33.Applied Chemistry 42.mechatronics 8. Any Other (Specify) 8.Information Technology 16.Food and Beverage 25.Surveying 34.Applied Phsyics 43. Accounts 9.Education Planning and Admin 17.Pharmacy 26.Economics 35.Aeronatical 44.Other Certify that the information is correct	4 MBA	4.Automotive	12.Business	21. Economics of Education	30.Hotel & managment	39.Graphic Arts & design	
7 PHD 7. Computer Science&engineering 15. Clothing 24. Chemical engineering 33. Applied Chemistry 42. mechatronics 8. Any Other (Specify) 8. Information Technology 16. Food and Beverage 25. Surveying 34. Applied Phsyics 43. Accounts 9. Education Planning and Admin 17. Pharmacy 26. Economics 35. Aeronatical 44. Other Certify that the information is correct	5 MED	5.Building	13.Electronics	22.Coomunication& Media	31.Health Science	40. Architecture	Learning
8. Any Other (Specify) 8. Information Technology 16. Food and Beverage 25. Surveying 34. Applied Phsyics 43. Accounts 44. Other Author	6 M'PHIL	6.Civil	14.Electrical	23.Library	32.Applied Biology	41.Telecommunication	
SIGNATURE: Signature Panning and Admin 17. Pharmacy 26. Economics 35. Aeronatical 44. Other	7 PHD	7.Computer Science&engineering	15.Clothing	24.Chemical engineering	33.Applied Chemistry	42.mechatronics	
Principal's NAME: Institutional stamp Personal No. Signature DEO/ MEO/DCE Institutional stamp Personal No. Date	8. Any Other (Specify)	8.Information Technology	16.Food and Beverage	25.Surveying	34.Applied Phsyics	43. Accounts	
Principal's NAME: TSC Number: SIGNATURE: DEO/MEO/DCE Institutional stamp Personal No. Signature Date		9.Education Planning and Admin	17.Pharmacy	26.Economics	35.Aeronatical	44.Other	
Principal's NAME: TSC Number: SIGNATURE: Date Institutional stamp Personal No. Signature Date Institutional stamp Personal No. Date	I certify that the informatio	n is correct		_			
TSC Number: Signature SIGNATURE: Date	Principal's NAME:			Institutional stamp			Institutional stamp
SIGNATURE: Date	TSC Number:						
	SIGNATURE:						
	DATE:				Date		

VIII. Study Programmes

TSC NO.	Name	Course Persuing	Date Started dd/mm/yy	Date Expected to complete dd/mm/yy	Area of Specialization Code	Mode of Training (FullTin
2						
3						
1						
<u>'</u>						
3						
7						
8						
9						
0						
<u>List Of Courses</u>	Areas Of Specialization	9. Education Planning and				Mode of Training
1 H. Diploma	1.Technology	Administration	18.medical lab. Tech	27.Engineering maths	36.Medical engineering	1. Full time
2 Tech.ED	2.Education	10.Entrepreneurship	19. French/ German	28.Secretirial	37.Fishers	2. Part time
3 MSC	3.Mechanical	11.Special Education	20. Guidance and counselling	29.Food & beverage	38.Printing Technology	3. Open learning
4 MBA	4.Automotive	12.Business	21. Economics of Education	30.Hotel & managment	39.Graphic Arts & design	 School based Correspondence/ Dist.
5 MED	5.Building	13.Electronics	22.Coomunication& Media	31.Health Science	40. Architecture	Learning
6 M'PHIL	6.Civil	14.Electrical	23.Library	32.Applied Biology	41.Telecommunication	
7 PHD	7.Computer Science&engineering	15.Clothing	24.Chemical engineering	33.Applied Chemistry	42.mechatronics	
any Other (Specify)	8.Information Technology	16.Food and Beverage	25.Surveying	34.Applied Phsyics	43. Accounts	
	9.Education Planning and Admin	17.Pharmacy	26.Economics	35.Aeronatical	44.Other	
ertify that the informa	ation is correct					
				County Director		
cipal's NAME:			Institutional stamp			Institutional stamp
				Personal No.		
C Number:				Signature		
				Dignature		
SNATURE:				Date		