

Kaimosi Friends University (KAFU)

Office of the Registrar, Academic Affairs

0743-522152

P.O Box 385 E-mail: registrar_aa@kafu.ac.ke Kaimosi - 50309 Website: www.kafu.ac.ke Kenya

KAFU/KNUT MOU TUITION FEES D	DISCOUNT FORM To be filled in Triplicate
Name:	Reg. No
KNUT Membership:	TSC No:
(Attach KNUT introductory letter)	(Attach a copy of Registration Certificate & Current pay slip)
National ID No:	Cellphone No:
Campus/Study Centre:	Year of Study
Program:	
Academic Year:	Semester:
Status of applicant, Tick () where applicab	ole
1. KNUT Member (Self)	
2. Dependent of KNUT Member	
(Attach birth certificate of Legal	Dependant)
This is to confirm that the above named sl Agreement for the Academic year and ser	hall be the ONLY BERNEFICIARY to the MMUST/KNUT MoU Tuition fees Discount mester stated above.
KNUT Member Signature:	Date:
Dependant Signature:	Date:
	OFFICIAL USE
Tuition Fees Information:	
Usual Annual Fees for Payment Kshs	
Usual Semester Tuition Fees for the progr	ram Kshs.
Official Certifying information:	Date:
(Admissions Office)	(Signature Stamp)
Recommendation to Finance Officer	

VERSION A REVISION: 01

KAFU/F/501/020

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Recommended Annual fees payable after discou	unt 16% Discount		
Recommended semester fees payable after 16%	6 Discount		
Academic year	Semester		
Registrar (Academic Affairs)	Date:		
Finance Office	Date	Signature:	

Please surcharge above named KNUT member/KNUT Member dependant for MMUST/KNUT/MOU Tuition fees Discount



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