

KAIMOSI FRIENDS UNIVERSITY (KAFU)

OFFICE OF THE REGISTRAR (ACADEMIC AFFAIRS)

Tel. No. 0773-040-235/0743522152 P.O. Box, 385 E-mail: registrar aa@kafu.ac.ke Kaimosi - 50309 Website www.kafu.ac.ke Kenya

GRADUATION APPLICATION FORM – 2023

To be filled in duplicate (original to be submitted to the Office of Registrar (Academic Affairs) and a copy to be retained by the applicant).

Sl	ECTION	A: Gradua	nd's details								
Sc	hool										
1.	Name (in full) (as pe	er the Admiss	sion Letter)						
											•••••
2.	Registra	ation No			Mobile No:						
3.	E-mail	address									
	program	nme (tick wh	ere applicabl	e) and (ind	licate option	where app	olicable)				
5.	Name o	of Programme	e:								
6.	Numbe S.No.	Academic Year of	Units successfully comp Semester 1		Semester 2		Semester 3		TOTAL		
	5.110.		/Trimester 1		/ Trimester 2		/ Trimester 3				
		study	No. of Courses	No. of Units	No. of Courses	No. of Units	No. of Courses	No. of Units	No. of Courses	No. of Units	
	1		Courses	Citis	Courses	Citis	Courses	Chus	Courses	Chiis	
	2										
	3										
	5										
	6										
7.	Acader	nic year in w	hich the prog	ramme wa	s completed	l					_
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St	udent's s	ignature:				Da	te:				
Sl	ECTION	B - For offi	icial use only	; :							
8.	Confirm	ned:□/Not (Confirmed 🗆	to gradua	ite (tick as a	ppropriate)	1				
9.	Dean o	f School:	Signature.			I	Date		Stamp		
17) Dogista	or (Academi	ia Affaira) (Signatura		D	ata		Stamm		
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	Essenti	al Instructio	ons								

- 1. Attach a copy of your National ID.
- 2. You are responsible for any error of omission or commission while filling this form.
- 3. You will NOT be allowed to graduate if;
 - You have not completed studies or has a supplementary. i)
 - ii) You have a pending disciplinary case, still on suspension or discontinued.
 - iii) You have a fee balance.
 - You give false information in this graduation application form.