



Quality Education for the Real World

Office of the Academic Registrar

INTER-ACADEMIC PROGRAMME TRANSFER REQUEST FORM

(To be submitted in duplicate)

Notes:

1. The University grants consideration for students to apply for transfer to another degree / diploma / certificate programme offered by the University other than the one admitted to.
2. Approval of transfer is subject to cluster requirements of the programme applied for and the limited vacant places declared by the respective Academic Schools.
3. Please read the **Eligibility Criteria** pronounced on the respective programme brochures before submitting your application.
4. Complete all required details below and sign where designated to do so.
5. Please attach a copy of your KCSE result slip / certificate
6. Applicants will be notified within one week on the verdict of the application upon consideration by the Senate Sub-Committee on Academic Programmes Transfer.

PART A : PERSONAL DETAILS

Official Names:..... Registration No:.....

Surname First Middle

Mobile Phone Number:..... Email address:

PART B : PROGRAM TRANSFER DETAILS

Current Academic Programme Admitted to :

Academic Programme Requesting to Transfer to:

Teaching Subject / Specialization options (where applicable).....

Reasons for Transfer Request

Student's Signature

Date.....

PROCESSING BY ACADEMIC REGISTRAR'S OFFICE

I acknowledge receipt of the duly completed form for approval by the Senate Sub-Committee on Academic Programmes Transfer

Name

Date

Signature & Stamp

Date approved by
Senate Sub- Committee

Distribution: 1. Original - Academic Registrar
2. Copy - Student