

APPLICATION FOR GRADUATION-IN-COUNCIL (FOR GRADUATED STUDENTS ONLY)

Scrolls & Academic Transcripts

(Please tick (/)where applicable)

INSTRUCTION: Please read the Terms and Conditions of Graduation-in-Council

TO BE COMPLETED BY APPLICANT								
NAME								
IDENTIFICATION/ PASSPORT NO.				PROGRAMME				
Please tick (/) where applicab	le	ī	1		1		1	
DEGREE	Bachelor		Master		Doctorate		PhD	
POSTAL ADDRESS								
PHONE NO.				EMAIL				
Please tick (/) where applicab	le							
METHOD OF COLLECTION	Hand	Mail*						
TERMS AND CONDITIONS	I have read and fully understand the terms and conditions of Graduation-in-Council.							
GRADUAND'S				DATE OF APPLICATION:				
SIGNATURE	FOR OFFICE USE ONLY							
VERIFICATION: ENDORSED BY :								
For Registrar	Cleared of	raduated by t any debts to anding debts y	the Universi		 trar			 Date
ACKNOWLEDGEMENT BY GRADUAND								
I,have received my Scro and Academic Transcript.								
Signature: Date:								
GRADUAND'S COPY APPLICATION FOR GRADUATION-IN-COUNCIL (Graduated Students Only)								
NAME								
IDENTIFICATION/ PASSPORT NO.				PROGRA	AMME			
DEGREE	Bachelor		Master		Doctorate		PhD	
DATE APPLIED		l .	1	DATE OF				-

Note: Students must present this slip upon collection of Degree Scrolls and Academic Transcripts . Academic Transcripts and Scrolls can be collected 14 working days after endorsement by the University Senate.