



**MACHAKOS UNIVERSITY**  
**OFFICE OF THE REGISTRAR (ACADEMIC AND STUDENT AFFAIRS)**  
**Supplementary /Special Examination Application Form**

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School..... Year of Study.....

**NOTE:** Ensure that you indicate all supplementary/special examinations you would like to register.

**Student Details**

**Name**.....**Registration Number**.....

**Indicate** { SUPPLEMENTARY (SP)  
OR  
SPECIAL EXAM (SE)

S/NO	Units/ Codes							Title	SP OR SE	
	E	F	N	3	0	2				
<i>E.G</i>								<i>PHILOSOPHY OF EDUCATION</i>	SP	-
1										
2										
3										
4										
5										
6										
7										
8										

Sign: Student.....DATE.....

Sign: C.O.D.....DATE.....

Sign: Dean of school.....DATE.....

Sign: Finance..... DATE.....

Sign: Registrar (ASA)..... DATE.....