

## MACHAKOS UNIVERSITY OFFICE OF THE REGISTRAR (ACADEMIC & STUDENT AFFAIRS) INTRA/INTER-SCHOOL TRANSFER FORM

## **IMPORTANT INFORMATION**

- (i) To be completed and scanned copies be emailed to: pokemba@mksu.ac.ke
- (ii) Students must meet the entry points and subject requirements of the programme they are seeking transfer into.
- (iii) Application for Intra/Inter-School transfer DOES NOT CONSTITUTE A TRANSFER. The transfer is NOT complete until the student receives an official letter from the Registrar (Academic) informing him/her that the application has been successful or otherwise.
- (iv) Attach a copy of your KCSE Results slip.

Chairman, Deans Committee

## SECTION A

SECTION A		
NAME	TTERS) (OTHER NAMES IN FULL	KCSE INDEX NO
(SURNAME IN BLOCK LE	TTERS) (OTHER NAMES IN FULL	)
BIRTH CERTIFICATE NO	K	CPE INDEX NO
School/Degree Course/Departme	ent Presently Registered	
Current Registration Number		
I wish to apply for transfer to the	above-mentioned School/Degree	course for the following reasons:
	3	
SECTION B: FOR 1	THE DEAN OF THE RELEASIN	NG SCHOOL/DEPARTMENT
I certify that the information enter Forwarded for consideration by t Signed:	ered by the applicant is correct. The Deans Committee	
Dean School of		
S	SECTION C: FOR DEANS COM	MMITTEE
Approved		Not approved
Signed:	D	ate: