THE CO-OPERATIVE UNIVERSITY OF KENYA

Website: www.cuk.ac.ke Email: admissions@cuk.ac.ke; Tel: 0724311606

CHANGE OF COURSE REQUEST FORM (DIPLOMA)

Instructions

1. *Attach a copy of the KCSE Result Slip and Admission Letter;*
2. *The form MUST be signed by the Directorate of TVET.*

Name: ..... Registration No.: .....

Year of study: ..... Semester: .....

Current School: ..... Current Programme: .....

Telephone: ..... Email Address: .....

Request for Inter Faculty/Inter Department Transfer to:

New Programme: .....

Reason(s).....

.....

.....

Student's signature ..... Date .....

For Official Purpose only

a) Approval by the Directorate (ITVET)

Recommended/Not Recommended: Director Sign & Stamp ..... Date.....

If not recommended, Remarks:

.....

b) Admissions Office

Approved/ Not Approved: Sign & Stamp ..... Date.....

For: Registrar (ACDRI)

ASSISTANT REGISTRAR (ADMISSIONS)
THE CO-OPERATIVE UNIVERSITY OF KENYA
P. O. Box 24814-00502
KAREN, NAIROBI