

CERTIFICATE COLLECTION FORM

(To be completed in TRIPLICATE: Admission/BPGS to retain COPY)

SECTION A

Graduand's personal details

Accurate contact information is essential to enable us share relevant important information with you.

NAME _____
(Surname) (Other names)

REG. No. _____ ID/PP NO. _____ NATIONALITY _____
(Registration No. as a Student) (National ID/Passport No.)

PROGRAMME _____ YEAR OF GRADUATION _____
(e.g. Biochemistry/ Technology Education etc.)

GENDER _____ PHONE No. _____ EMAIL _____
(Include country code)

SIGNATURE. _____ DATE _____
(Signature of Graduand)

SECTION B

Finance Office (Complete the remark column)

I confirm the above named:

1. Has cleared all the University debts YES/NO _____
2. Has paid Alumni and graduation fees (Kshs. _____) YES/NO _____
3. Has paid charges for Academic Attire (Ksh. _____) YES/NO _____
4. Receipt Number for 2 and 3: _____

(Attach fee statement)

SIGN _____ DATE _____
(Finance Officer & Stamp)

SECTION C

Admission/BPGS Office (Complete the remark column)

The following forms must be submitted and retained for future reference

I confirm the above named has submitted:

1. Clearance form YES/NO _____
2. Graduation Registration form YES/NO _____
3. Copy of Alumni and graduation fees Receipt(s) YES/NO _____
4. Gown, Hood and Cap (Returned collected items) YES/NO _____

SIGN _____ DATE _____
(Admission/BPGS Office & Stamp)

SECTION D

Collection of Certificate

*The graduands **must** produce (i) **Original National ID/PP and a copy.** (ii) **If proxy, must produce a Letter of Authority and Original National ID/PP and a copies for proxy and graduand.***

NAME OF COLLECTOR _____ ID/PP NO. _____
(Full names of Graduand/Proxy)

PHONE. _____ SIGNATURE. _____ NATIONALITY _____

SECTION E

Official Use

Certificate Serial No. _____ SIGNATURE _____ DATE _____
(issuing Officer for DVC (ASA))
