

CHUKA



UNIVERSITY

## CREDIT TRANSFER APPLICATION FORM

## INSTRUCTIONS:

- (a) This form should be completed and returned to the respective Dean of Faculty within the first 2 weeks after the start of the first academic year.
- (b) All sections should be completed in Block letters in triplicate
- (c) Pay non-refundable application fee Ksh.1000.00.
- (c) Successful applicants are required to pay Ksh 1000.00 per credit factor approved by the University before any transfer is made.
- (d) The Credit transfer shall not exceed one third or 30 % of the total CFs of the degree programme.
- (e) **Ensure that you attach the Following:**
- Certified copy of your admission letter and copy of national ID.
  - Certified copy of Certificate, Diploma, CPA, CPS and the transcripts.
  - Original receipt (application fee).

## PERSONAL DATA

Name.....Reg. No.....  
 (Surname) (Other names)

Faculty.....Department.....

I hereby apply for credit transfer for courses in..... Diploma/Degree against the courses taken in my Diploma/Degree in..... or CPA/ CPS and scored a grade B and above as shown below or passed Teaching Practice/Field Attachment with grade C minimum and successfully taught /worked for 2 years in a relevant field.

SN	code	Chuka University course title	CF/ Hrs	Code	Title of equivalent course already taken (Diploma/Degree*, CPA, CPS etc.)	CF/ Hrs	Grade	Remarks (Q/NQ)
SN	code	Chuka University course title	CF/ Hrs	Code	Title of equivalent course already taken (Diploma/Degree*, CPA, CPS etc.)	CF/ Hrs	Grade	Remarks (Q/NQ)


\* Applies to those already enrolled for degree programmes in other universities and wish to transfer to Chuka University

Q Qualified

NQ Not qualified

**DECLARATION**

I ..... certify that the information given in this application form is correct to the best of my knowledge:

Sign.....Reg. No.....Date.....

**FOR OFFICIAL USE ONLY**

**(a) Recommendation of Head of Department:**

- i. Total CF's Applied for Transfer.....
- ii. Total CF's Recommended for Transfer.....
- iii. Total CF's Not Recommended for Transfer.....

**COD Sign.....Date..... Official stamp.....**

**Recommendation of the Faculty Board of Examiners:**

- i. Total CF's Applied for Transfer.....
- ii. Total CF's Recommended for Transfer.....
- iii. Total CF's Not Recommended for Transfer.....

**DEAN OF FACULTY: Sign.....Date..... Official stamp.....**

**(b) REGISTRAR (ACADEMIC AFFAIRS): Approved/Not Approved**

Sign.....Date.....Official stamp.....

**(c) Finance Department**

- (i) Total CF's approved.....@ Ksh.....
- (ii) Amount paid Ksh..... Receipt No. ....

Sign.....Date.....Official Stamp.....