

REGISTRATION AND STUDENT RECORDS

DEFERMENT OF STUDIES FORM

<u>SECTION 1</u> (To be completed by the student)			
1.1	<u>SURNAME</u> :	<u>FOREN</u>	<u>AMES</u> :
1.2	NATIONAL ID NUMBER:		
1.3	STUDENT REGISTRATION NUMBER:		
1.4	DEPARTMENT:	MOI	DE OF STUDY
1.5	SCHOOL /FACULTY:		
1.6	PART (Tick Appropriate box)		
	PART 1 PART 2	PART 3	PART 4
Please state reasons why studies are being deferred:			
SIGNED: DATE DATE			ATE
DEPA	RTMENT		
I confirm that the above named student has handed in all Departmental books, equipment, keys etc.			
SIGNED: DATE			
Chairman of Department			
LIBRARY			
I confirm that there are no library books or periodicals etc still on loan to the above named student and that there are no outstanding fees, charges or fines still unpaid.			
SIGNED: DATE			
	Librarian		
OFFICIAL USE ONLY Date form submitted			Day/Month/Year
Date IC	orm submitted		
SIGNED: DATE			
AR Registration and Student Records			
	Copies Department School Office Finance		