



# THE CATHOLIC UNIVERSITY OF EASTERN AFRICA

## ACADEMIC AFFAIRS DIVISION ACADEMIC REGISTRAR'S OFFICE

### GRADUATION APPLICATION FORM

#### DEGREE/DIPLOMA/CERTIFICATE REQUEST:

Print your name as per admission details. This is the order in which the names will appear on your final transcript and certificate.

Name: \_\_\_\_\_

Programme of Study: \_\_\_\_\_ Faculty \_\_\_\_\_

Qualification Expected (underline as appropriate, to infer graduation gown and hood):

Certificate/Diploma/Advanced Diploma/Bachelor/PG Diploma/Master/Doctoral

Duration of Study (Year Admitted to Year Completed): \_\_\_\_\_

CUEA Registration Student No: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

DD Month Year

#### Indicate (Likely) Study Completion:

- I will complete my graduation requirements by the end of April/August of the 2018/19 academic year. [select as appropriate]

OR

- I completed the requirements for graduation at the end of April/August/December in the 2017/2018/2019 academic year [select as appropriate]

#### Indicate your contact addresses (include Country if not Kenya):

Current: \_\_\_\_\_ Tel: \_\_\_\_\_

Email: \_\_\_\_\_

After Graduation: \_\_\_\_\_ Tel: \_\_\_\_\_

Email: \_\_\_\_\_

Country of Origin: \_\_\_\_\_ County (if Kenyan) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

*N.B. Applications should be submitted by 30 April of graduating year to Office of Registrar Academics or sent by email to [graduation@cuea.edu](mailto:graduation@cuea.edu). All applications shall be acknowledged with a reference number. Candidates with complete or nearly-complete transcripts shall then be advised to initiate the clearance process.*

*Please note that submission and receipt of this form is not an acknowledgement the applicant has met the graduation requirements.*