



## OFFICE OF THE REGISTRAR ACADEMIC AFFAIRS

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Main Campus, Kibos  
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### APPLICATION FOR GRADUATION FORM

(To be filled in BLOCK letters)

1. ....  
(Surname name ) (First name ) (Second name)

*Note: Initials not allowed*

2. Registration Number .....

3. National ID Number .....Nationality.....

4. Programme .....

5. School/Faculty .....Department.....

6. Gender.....County.....

7. Tel. No..... Email.....

8. Total number of Units/Courses.....

Signature.....Date.....

### FOR OFFICIAL USE ONLY

a. Finance Officer: Fee Balance .....

b. Dean of School/Faculty: Cleared for Graduation .....

**Note: 1. To be filled before completion of final Trimester**

**2. This form MUST NOT be filled by Past Cohorts**

All completed forms to be delivered to the Admissions Office at Main Campus, Kibos