DECLARATION OF INTENT TO GRADUATE

AFRICA NAZARENE
U N I V E R S I T Y

**Please fill in this form and obtain ALL verifications and clearances.
NB: attach a filled and approved course planner together with
your transcript and a copy of your National ID or Passport**

STUDENT INFORMATION

SURNAME (LAST NAME ON ID/PP) OTHER NAMES (STARTING WITH THE FIRST NAME ON THE ID/PP)

TEL: EMAIL:

P.O. BOX CODE TOWN

VERIFICATION OF ACADEMIC QUALIFICATION (BY ACADEMIC ADVISOR/HOD)

ACADEMIC REQUIREMENTS HAVE BEEN MET ☐ NOT MET ☐

ACADEMIC ADVISOR/HOD: SIGNATURE: DATE:

GRADUATION PHOTO (PHOTOGRAPHER)

PHOTOGRAPHER: SIGNATURE: DATE:

Graduation Ceremony

The Annual Graduation Ceremony for Africa Nazarene University will be held at Ongata Rongai Campus in July, every year (Kindly confirm dates with the exam office).

Requirements for Graduation

Intent to graduate Form - Be sure that you have completed the required course units for your program. The intent to Graduate Form MUST be submitted to the Examination office before March of the year of graduation.

Fees Balance - All fees due including Graduation & Exemption fees should be paid in full before May of the year of graduation.

Verification of Names - Please make sure your names are correctly spelt and are in the order reflected in your National ID or Passport. Confirm with the examination office through exams@anu.ac.ke or personally visiting the Office.
However, note that any change of name on the Certificate after verification will attract a charge of Kshs. 5,000

Instructions:
1. Confirm that all required units and marks have been entered in your TRANSCRIPT correctly.
2. A student who has not satisfied all the requirements for Graduation will not be awarded the corresponding certificate.
3. Once the Diploma/degree certificate is awarded/ conferred, no changes will be made.

Please print your names exactly as they appear on your national ID or Passport (*See Verification of Names*).

NAME:

FULL TITLE OF COURSE/PROGRAM:

Major/Specialization (if any):

I testify that I have satisfied all requirements for graduation and agree that if proven otherwise, Africa Nazarene University will not issue my Diploma/ Degree Certificate. I also understand that once it is issued, no changes will be made.

Name Student ID

Signature Date