



UNIVERSITY OF EMBU

CONTINUING STUDENT REGISTRATION FORM

NOTE;

This form must be submitted to admissions office at the end of the registration exercise

SEMESTER **ACADEMIC YEAR** **DATE**

STUDENT'S DETAILS

Name Reg. No

Tel. No E-mail Address

School Degree Programme

A. FINANCIAL OBLIGATIONS (PAYMENT OF TUITION & ACCOMMODATION FEES)

Name of Bank Bank Slip No

Amount paid (KShs): Fees Accommodation

Name of Verifying Finance Officer

Signature Date and Stamp

B. HOSTEL AND ROOM ALLOCATION

Hostel and Room Allocated

Name of Allocating Officer

Signature Date and Stamp

C. SIGNING OF NOMINAL ROLL

Name of the Officer in Charge

Signature Date and Stamp