

AFRICA INTERNATIONAL UNIVERISTY (AIU) LATE REGISTRATION FORM

This form must be duly completed in order for it to be processed Student No:

Name:

Programme:

Planned Graduation Year:

No. of units to Register for (please list below- specify if any challenge/ directed):

#	Course Code	Course Title
1		
2		
3		
4		
5		
6		
7		
8		

Give reasons for Late Registration

- 1. 2.
- 3.

Date Requested

Student Signature

For Official use only

Academic Advisor's Recommendations:

Date:

Signature and Stamp:

Finance Department

This student is allowed to Register for

Date:

Signature and Stamp:

Registrar's Department:

Date Received

Officer Received

Units