AFRICA INTERNATIONAL UNIVERISTY (AIU)
REQUEST FOR TRANSFER OF CREDIT FORM

Name of student _____ Student Number: _____

Programme of study_____ Year _____

Previous school: _____

Date of graduation_____ Certificate [ ] Diploma [ ] Degree [ ] Other [ ]

I request that the following courses for which I have earned prior credits be transferred

From former College/University				**Replace with (AIU course in programme being sought)**		
Code	**Course**	**Grade**	**Credit**	**Code**	**Course**	**Credit**

Student Signature _____ Date _____

Official use only

This request is Approved [ ] Not Approved [ ]

Comments: _____

_____
HOD's Signature

_____ _____
Academic Dean's Signature Registrar's Signature

NB. - Please attach i) a copy of official transcript (or certified copy by AIU Registrar) and
ii) Course syllabus(es) or template(s) from the previous institution.
iii) Application for transfer of credit Ksh 1125.

After credit transfer is approved, each course transferred is charged Ksh 1125