



KOITALEEL SAMOEI UNIVERSITY COLLEGE
(A Constituent College of the University of Nairobi)
REQUEST FOR CHANGE OF PROGRAMME FORM

This form should be returned to Admission office immediately after completion **latest 23rd August 2024.**

Name of Student: _____ Registration No: _____

Request to transfer from Bachelor of _____ in the School _____ to

Bachelor of _____ offered in the School of _____

WARNING

1. You will be disqualified if you submit an application for transfer into more than one course.
2. It is a criminal offence which shall lead to disciplinary action and may further lead to criminal proceedings in the Court of Law if you give falsified information of your KCSE results.
3. Your KUCCPS Login details are mandatory. Please fill in the section below.

KUCCPS Login Credentials: Username: _____ Password: _____

KCSE RESULTS (Attach a Copy of the Result Slip) or Certificate (Mandatory)

S.NO	SUBJECT	GRADE	POINTS	REMARKS
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				

Mean Grade: _____ New Programme Cut of Points (CoP) by KUCCPS: _____

Student's Weighted Cluster Points (WCP) by KUCCPS: _____

I..... Declare that I have read and understood the warning herein and that the information I have given in this Form is true and correct.

Student Signature: _____ Date: _____

OFFICIAL USE ONLY

A. Verification by KUCCPS: _____ Date: _____

B. Consideration by the Directors' Committee:
Signed: _____ Date: _____

C. Issuance of Interprogramme/Interfaculty Transfer letter
Signed: _____ Date: _____