

REGISTRAR ACADEMIC AFFAIR

CERTIFICATE PICKING AUTHORIZATION FORM

Reference F-7-19
Issue/Rev 1/4

SECTION A STUDENT DE	TAILS (Please writ	e in Capital	letters)
NAME	AD	MISSION NO)
COURSE	GR/	ADUATION	YEAR
PHONE	ID NO	DAT	E
B. DECLARATION (to	oe filled by the own	er of the cer	rtificate/result slip
I hereby authorizeID No			nyof tificate/ Result slip since
(indicate reason)			
A photocopy of my Natio	nal ID/ Passport is a	attached for	your verification.
			red to produce a national ID es when collecting the said
acknowledgment of the	receipt of the said	d document.	the authority to sign for I understand that I shall be said document from my
Signature	Date		
SECTION C. OFFICIAL	JSE ONLY(Officer is	ssuing the c	certificate)
Name	signature	Date &	Stamp

OFFICE OF T TRAR-ACADEMICS

O 4 MAR 2023

P. O. Box 2768 - 00200,
NAIROBI