



**ZETECH
UNIVERSITY**

Inventing the future

REGISTRAR ACADEMIC AFFAIRS

REQUEST FOR CERTIFICATE REPRINT FORM

Reference F-7-18

Issue/Rev. 1/1

SECTION A: STUDENT DETAILS

FULL NAME:		ADMISSION NO:	
COURSE:		DEPARTMENT:	
MOBILE NO:	E-mail:		
CAMPUS:	ID :	DATE OF ADMISSION	STUDENT SIGN
REASON FOR REPRINT (Tick appropriately) LOST <input type="checkbox"/> OTHER <input type="checkbox"/> SPECIFY <input type="checkbox"/>			
CONFIRMED NAME (Tick appropriately) YES <input type="checkbox"/> DATE OF CONFIRMATION			
NO <input type="checkbox"/>			
CORRECT NAME:			

NOTE:

- Submit the original Certificate that has an error together with this form.
- Attach police abstract and affidavit for lost certificate/transcripts
- Attach approved Deed poll form and or name confirmation evidence for reprint of certificates and transcripts.
- Certificate reprint ksh.5000 per copy, transcript reprint ksh500 per copy

SECTION B: APPROVAL FOR REPLACEMENT (This section should be filled in order of appearance)

RECORDS OFFICER Name.....	Signature and stamp
STUDENTS FINANCE Name.....	Signature and stamp
REGISTRAR ACADEMIC AFFAIRS Name.....	Signature and stamp

Authorized on 04/03/2025

