

LAIKIPIA

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UNIVERSITY

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**OFFICE OF THE REGISTRAR (ACADEMIC AFFAIRS)**

**DEFERMENT APPLICATION FORM FOR CONTINUING STUDENTS**

**(To be completed in triplicate and in CAPITAL LETTERS)**

**The Registrar (Academic Affairs)**

**Through,**

**Dean of School**

**Through,**

**Chairperson of Department**

**Dear sir/Madam,**

**APPLICATION FOR DEFERMENT OF STUDIES**

**I wish to defer my studies to the next academic year.**

**Reasons for deferment of studies (Attach evidence where necessary).....**

**Student's Names: .....**

**First Middle Last/Surname**

**Registration No: .....ID No..... Year of Study.....**

**Program of Study.....**

**Student Mobile No. .... Parent Mobile No. ....**

**Signature..... Date.....**

**Vision : A University for Valued Transformation of Society**

**Mission: To serve students and society through research, education, scholarship, training, innovation, outreach and consultancy**



Laikipia University is ISO 9001:2015 and ISO/IEC 27001:2013 Certified

