

## **ACADEMIC CERTIFICATES REQUEST**

### **\*DETAILS OF THE APPLICANT**

Registration No -

Index No -

Batch No -

Full Name –

Contact No -

E-Mail –

### **\*REQUESTING CERTIFICATES**

For B.Sc. (Hons) in Nursing / B. Pharm (Hons) / B.Sc. (Hons) Medical Laboratory Sciences Degrees

Academic Transcript

Dean's Letter

Course Content

### **ADDITIONAL INFORMATION**

#### **\*PAYMENT**

Payment slip attached

**\*Must be filled by the applicant.**