



UNIVERSITY OF NAIROBI
OFFICE OF THE DEPUTY VICE-CHANCELLOR
(ACADEMIC AFFAIRS)

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DATE

APPLICATION FOR AMENDMENT/CORRECTION OF NAME(S)

FROM:.....
(Current name – to be amended)

TO:.....
SURNAME (Last Name) OTHER NAMES (Starting with First Name)

REGISTRATION NUMBER

YEAR OF STUDY

NATIONALITY

EMAIL.....

CELPHONE.....

(Please attach relevant documents as applies to your case, that is, a copy of Letter of Admission, KCSE certificate or slip, National ID/Passport, Affidavit/Birth or Marriage Certificate)

Note:

- 1. This application will strictly be allowed only in the 1st or 2nd year of study.
2. Drop filled in form at the Main Admission Office, Administration Block, 1st Floor.
3. Effected changes can be confirmed at your Faculty after two working days from the date this application is received – your student’s portal may not reflect the changes.

(Student’s Signature)

FOR OFFICIAL USE ONLY

APPROVED/NOT APPROVED:DATE:.....
ACADEMIC REGISTRAR



ISO 9001:2015 CERTIFIED

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