



THE CO-OPERATIVE UNIVERSITY OF KENYA  
P.O BOX 24814-00502, Karen-Nairobi Tel: 020-2430127/2679456 Fax:020-2470638

**EXEMPTION APPLICATION FORM**

**INSTRUCTIONS**

1. Student must have been admitted into one of the University Programmes
2. Attach certified copies of relevant certificates and transcripts that specify grades for each unit done.
3. In filling out this form, refer to regulations on exemptions as stipulated in the Exemption Policy
4. The student may not be exempted in a unit where he/she sat for supplementary examination.
5. Pay non-refundable application fee of One thousand shillings (Ksh. 1,000) only.

Name: ..... Reg. No: .....

Phone Number: ..... Email Address: .....

Degree Programme applied for: .....

Institution(s) attended: .....

Programme completed: .....

Overall Award: .....

**A) UNITS FOR WHICH EXEMPTION IS REQUESTED**

S/No.	UNIT CODE	UNIT TITLE	Grade attained	Approved/Not Approved
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				

Applicant's signature: .....

Date:.....

**REGISTRAR (AA)**  
**THE CO-OPERATIVE UNIVERSITY**  
**OF KENYA**  
UKK ISO 9001: 2015 Certified  
**P.O. Box 24814-00502, KAREN**  
**NAIROBI**

B) UNITS FOR WHICH EXEMPTION IS NOT GRANTED

S/No.	UNIT CODE	UNIT TITLE
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		
13.		
14.		
15.		

Dean/Director of the School: Approved  Not approved

.....  
Signature and Stamp

.....  
Date

C) FOR OFFICIAL USE ONLY

i) Payment of exemption application fees

Name of Officer..... Signature and Stamp ..... Date .....

ii) Chairperson, Deans Committee: Approved  Not approved

.....  
Signature and Stamp

.....  
Date

**REGISTRAR (AA,  
THE CO-OPERATIVE UNIVERSITY  
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NAIROBI**



CUK is ISO 9001: 2015 Certified