



**MULTIMEDIA UNIVERSITY OF KENYA**

P O Box 15653-00503, Nairobi, Magadi Road, Kenya

Tel. +254 2071391 Fax: +254 2071247

(MMU is ISO 9001:2015 Certified)

Office of the Registrar, Academic Affairs

Email: [registraraa@mmu.ac.ke](mailto:registraraa@mmu.ac.ke)

**NOTICE**

**FROM: REGISTRAR, ACADEMIC AFFAIRS**  
**TO: ALL NEW STUDENTS**  
**REF: MMU/REG.AA/TRANS/VOL.1**  
**DATE: 28<sup>TH</sup> SEPTEMBER, 2020**  
**SUBJECT: INTER/INTRA FACULTY TRANSFERS - 2020/2021 ACADEMIC YEAR**

This is to inform all **first year students** wishing to apply for **change of course after the September, 2020 intake** to follow the procedure below:

1. Download the inter/Intra-faculty transfer application form from the MMU website
2. Fill the form, scan and submit to the email: **[admissions@mmu.ac.ke](mailto:admissions@mmu.ac.ke)** by **Friday 2<sup>nd</sup> October, 2020 for processing**. Late applications will not be considered.
3. Only those students who have already registered and who meet the **CUT-OFF-POINTS (COP)** for the specific courses they are seeking to transfer to, will be considered subject to **AVAILABILITY OF SPACE**.
4. The relevant Committee of the University will meet to consider the applications on **Wednesday 7<sup>th</sup> October, 2020** and results will be communicated to the students on the **same day** to facilitate timely transfer.
5. All successful students will be issued with new letters of admission to enable them register in their **new Faculties/programmes by Friday 9<sup>th</sup> October, 2020**.

  
**DR. JOASH K. MULABE, Ph.D.,**  
**REGISTRAR, ACADEMIC AFFAIRS**



Cc. Vice Chancellor  
DVC/AA, R&I  
Deans of Faculties  
Dean of Students  
All Chairpersons of Departments

Finance Officer  
SAR Admissions  
MUKSA Chairman  
MUKSA Academic Affairs & Clubs Secretary

Riding on Technology, Inspiring Innovation





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## INTER/INTRA-FACULTY TRANSFER APPLICATION FORM

### APPLICANT SECTION

KCSE Index Number:..... KCSE Year: ..... KCPE Index No:.....

Surname: ..... Other Names:.....

Birth Certificate No: ..... Mobile Number: .....

**NB: Please attach a copy of your KCSE Result Slip**

### **Transferring from:**

Name of Faculty(e.g. Faculty of Engineering):.....

Programme Registered in (e.g. BSc. in Civil Engineering):.....

### **Reason(s) for application for transfer:**

1. ....  
.....
2. ....  
.....

### **Seeking transfer to:**

Name of Faculty (e.g. Faculty of Business and Economics):.....

Students Weighted Cluster Points: .....

Programme Transferring to (e.g. Bachelor or Commerce):.....



**FOR OFFICIAL USE ONLY:**

**ENDORSEMENT BY THE FACULTY THE CANDIDATE IS TRANSFERING FROM:**

This section is to be completed by the Dean of Faculty from where the candidate is transferring FROM:

Transfer Endorsement YES ☐ NO ☐

Endorsing officer:

Name \_\_\_\_\_

Designation \_\_\_\_\_ Sign and Stamp \_\_\_\_\_ Date \_\_\_\_\_

**ENDORSEMENT BY THE FACULTY THE CANDIDATE IS TRANSFERING TO:**

This section is to be completed by the Dean of Faculty from where the candidate is transferring TO:

Transfer Endorsement YES ☐ NO ☐

Endorsing officer:

Name \_\_\_\_\_

Designation \_\_\_\_\_ Sign and Stamp \_\_\_\_\_ Date \_\_\_\_\_

**REGISTRAR ACADEMIC AFFAIRS**

MMU Cut off Points	Candidates Weighted Cluster Points	QUALIFIED	NOT QUALIFIED

