



CAMPUS ACCOMMODATION REGISTRATION FORM

For your accommodation registration to be processed, you are required to provide evidence of your Admission Letter and/or Scholarship Letter



SESSION: _____

FULL NAME (IN BLOCK LETTERS): _____

STUDENT REGISTRATION NUMBER: _____

GENDER: _____ DATE OF BIRTH: _____

NATIONALITY: _____ MARITAL STATUS: _____

STREAM: _____

DEGREE IN VIEW: _____

DURATION OF ACCOMMODATION STAY: _____

HOME ADDRESS: _____

CONTACT NUMBER: _____ EMAIL: _____

NEXT OF KIN: _____

ADDRESS: _____

CONTACT NUMBER: _____

For Day Students or Students whose scholarship does not cover accommodation fees, the accommodation rates are shown below:

Shared Double Room(Ensuite): \$4,000/per bedspace

Single Room (Ensuite): \$8,000

All requests will be treated on a first come first serve basis depending on availability of space.

I have carefully read the University's Facilities Code and I undertake that I will abide by the rules and regulations as stated in the University's Facilities Code document. In case of violation of the rules, I will be responsible for consequences and accept whatever sanction is given by the Operations Department.

Date

Signature of Student

FOR OFFICE USE ONLY

HOSTEL NAME: _____

ROOM NO: _____

ACCOMMODATION OFFICER

ASS. DIRECTOR OPERATION