

	ZETECH UNIVERSITY	REGISTRAR ACADEMICS	
TITLE	REQUEST FOR COMPLETION LETTER	Reference	F-7-81
		Issue/Rev	1/2

Name of student

Admission Number

Commencement: Intake Month..... Year.....

Completion: Month..... Year.....

Programme.....

I would like to request for a completion letter having undertaken **ALL** the requirements of my course.

Specialization (if any)..... Month & Year of Graduation.....

Students signature **Tel no.**..... **ID No.**.....

HoD-Department.

Name:..... Signature Date:.....

Examinations office.

Name:..... Signature Date:.....

Library.

Name:..... Signature Date:.....

Records Office.

Name:..... Signature Date:.....

Registrar (AA)

Name:..... Signature Date:.....

