



KAIMOSI FRIENDS UNIVERSITY (KAFU)

OFFICE OF THE FINANCE OFFICER

DOCUMENT ADJUSTMENT FORM

NAME:.....SIGN.....DATE.....

ID NO.....REG. NO.....SEM.....ACADEMIC YEAR..... TEL NO:

(Please indicate in the space provided below the type of adjustment and amount)

S/N	COURSE CODE	✓ TICK	AMOUNT
1	Catering Meals		
2	Surcharge and Fines		
3	Accommodations		
4	Fees		
5	Other (Please specify)		

Reasons/circumstances for adjustment

.....

Student Signature:Date:

HOD

Name: Signature & Stamp:Date:

Registrar (AA)

Name: Signature & Stamp:Date:

VC/DVC ASA/DVC F&D

Name: Signature & Stamp:Date:

Finance Officer

Name: Signature & Stamp:Date:

(Attach Fee Statement)