



KAIMOSI FRIENDS UNIVERSITY (KAFU)

Office of the Registrar, Academic Affairs

APPLICATION FOR REMARKING

Registration Number: Name: Date:

Academic Year: Semester: Telephone No:

Please indicate below the course codes and titles of examinations for which remarking is requested:

S/N	Course Code	Course Title

Reasons for appeal for remarking

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**Chairperson of Department
Comments**

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Name: Signature & Stamp Date:

**Dean of Faculty
Comments**

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Name: Signature & Stamp Date:

Registrar (AA)

Signature:

NOTE:

- Request for remarking must be done within a month after senate confirming the results.

- A candidate who requests for a remark shall pay a non-refundable fee of Ksh.750 per paper.