

**UNIVERSITY OF IRINGA  
ADMISSIONS OFFICE**



**INTERNAL TRANSFER APPLICATION FORM  
(From One Program to another)**

*(To be filled in duplicate and attach COPIES of Form IV(s), VI(s) or AVN)*

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**A. PERSONAL RECORDS:**

1. Token Number.....
2. First Name (*As in your IV Certificate*): .....
3. Second Name (*As in your IV Certificate*):.....
4. Surname (*As in your IV Certificate*):.....
5. Gender: .....
6. Form Four (IV) Index Number: ..... year .....
7. Other Form Four (IV) Index Number: ..... year .....
8. Form Six (VI) Index Number: .....year.....
9. Other Form Six (VI) Index Number: ..... year .....
10. Award verification number (AVN): .....year .....
11. Programme Admitted: .....
12. New Programme: .....
13. Academic Year: .....
14. Email address: .....
15. Telephone/Mobile Number: .....
16. **Reason for Transfer (Consult career Guidance personnel)**  
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**B. DECLARATION**

I declare that the information and documents provided are true and correct to the best of knowledge

**Signature** ..... **Date**.....

**C. APPROVAL DECISION** (To be completed by the authorizing officer)

- a) I approve / deny the above request
- b) If denied give reasons .....

**Name** .....

**Signature** .....

**Designation** .....

**Date** .....20.....

**NOTE:**

- *The transfer will be conducted within two weeks from the date of opening the University.*
- *Admission status, Qualifications and Capacity of the programme will be the factors under considerations.*
- *The applicant must attach his/her academic certificate(s) and Admission letter*