



MACHAKOS UNIVERSITY
OFFICE OF THE REGISTRAR
(ACADEMIC AND STUDENT AFFAIRS)

HIRE OF ACADEMIC DRESS FORM

(To be completed in duplicate: Copy for School & Graduand)

Part I

Name.....

(First Name)

(Middle Name)

(Last name/Surname)

Registration Number.....

School.....Course.....

Address.....Postal Code.....Town/City.....

Mobile Number.....e-mail.....

I hereby confirm that I have collected from the School of.....

the following items in good condition: *(Tick as appropriate for items collected)*

a) Gown

b) Hood

c) Cap

Sign.....Date.....

(Graduand)

Sign.....Date.....

(Issuing Officer)



Part II

Return of graduation attire

I hereby confirm that the following items have been returned in good condition to the School of..... *(Tick as appropriate for items returned)*

- a) Gown
- b) Hood
- c) Cap

Name.....Sign.....Date.....
(Graduand)

Name.....Sign.....Date.....
(Receiving Officer)

Remarks.....
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(Brief remarks on nature of damages or poor conditions of returned items if any. Students who did not collect the academic attire to be noted here)