



(A Constituent College of Moi University)

ROOM ALLOCATION FORM

STUDENT DETAILS

NAME _____

SURNAME

FIRSTNAME

MIDDLE NAME

REG/ ADMISSION NUMBER _____ ROOM No. _____

HOSTEL NAME _____ AMOUNT PAID: _____

ADMINISTRATIVE ASSISTANT

SIGN: _____

DATE: _____

ADMINISTRATIVE OFFICER

SIGN: _____

DATE: _____
