



DEDAN KIMATHI UNIVERSITY OF TECHNOLOGY

P.O. BOX 657 - 10100, NYERI

TELEPHONE: 0709202914, Ext. 1032

E-mail: registraraa@dkut.ac.ke; website: www.dkut.ac.ke

Office of the Registrar, Academic Affairs & Research

Self-Sponsored Students Course Acceptance Form (Page: 1 of 1)

Document No: DeKUT/AAR/APS/FORM 1/1

2025/2026 Academic Year

SECTION I: Programme Details

1. Name of the Programme admitted to at Dedan Kimathi University of Technology
.....
2. Campus admitted to.....
3. Expected Date of reporting to the University.....
4. Year of Study I ☐ II ☐ III ☐

SECTION II: Course Acceptance Declaration (To be Completed by those accepting the Offer only)

I accept the Offer/Programme

I..... (Insert Student Name in full) on this
Day.....Month.....Year..... declare that **I DO ACCEPT** the offer and I promise
to abide by the Rules and Regulations Governing the Conduct and Discipline of Students of
Dedan Kimathi University of Technology. I hereby undertake to complete the programme for
which I have been admitted at Dedan Kimathi University of Technology unless I am
discontinued by the University Senate. I understand that I cannot change the Programme of
Study unless permitted in writing by the University.

Student's Signature:..... Date of Signature:.....

NOTE: *The completed form should be scanned and sent to the following email:
admissionsoffice@dkut.ac.ke. Once received, the student will be issued with a registration
number with which he/or she will be able to log into the Student Online Registration Portal and
register before reporting to the University.*