



UNIVERSITY OF EASTERN AFRICA, BARATON

P.O. BOX 2500 – 30100 ELDORET, KENYA, EAST AFRICA

TELEPHONE: 52471

FAX: 020-0023017

FOR BOARDING STUDENTS ONLY

NAME _____ DATE _____
ID# _____ ROOM NO: _____ DESTINATION _____
MEANS OF TRAVEL _____ PURPOSE OF TRAVEL _____
CHECK ONE: DAY LEAVE _____ OVERNIGHT _____ WEEKEND _____
OTHER _____ DATE AND TIME OF DEPARTURE _____
DATE/TIME OF RETURN _____ TEL# _____

If You Are Missing Classes List them below and Obtain Instructor’s Signature:

CLASS	SIGNATURE
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DORMITORY DEAN’S SIGNATURE -----
DEAN OF STUDENTS’ SIGNATURE -----
REGISTRAR’S SIGNATURE -----

NOTE:

- Form is for All campus leaves other than field trips and other official off campus leaves.
- Form is to be filled out in triplicate, once copy for **Student**, one for **Dorm Dean** and one for **Registrar’s Office**.
- Request is to be made no late than 3 Days before Intended Departure

Yellow – Registrar Green – Dean’s Office Blue – Student



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FOR OFF-CAMPUS STUDENTS ONLY

NAME _____ DATE _____

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OFF-CAMPUS DEAN’S SIGNATURE -----

DEAN OF STUDENTS’ SIGNATURE -----

REGISTRAR’S SIGNATURE -----

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