



EAST AFRICAN SCHOOL OF AVIATION GRADUATION REGISTRATION FORM

NAME: _____
(Surname) (Other names)

CONTACT: _____ ID/Passport No. _____
(Tel)

ADMISSION NUMBER(S): _____
(Eg: - EASA/AVI/1111/9)

COURSE(S) UNDERTAKEN:
COURSE TITLE: _____ PERIOD _____
Eg. (Engineering) (2007 - 2009)

COURSE TITLE: _____ PERIOD _____
Eg. (Engineering) (2007 - 2009)

COURSE TITLE: _____ PERIOD _____
Eg. (Engineering) (2007 - 2009)

HAVE YOU COLLECTED YOUR
CERTIFICATE(S): YES _____ NO _____
 YES NO

Date: _____ Signature _____

SCAN AND SEND THIS FORM TO graduation2018@easa.ac.ke OR
registrar@easa.ac.ke

BY

DEADLINE 16TH NOV 2018

CONGRATULATIONS TO THE CLASS OF 2018!!