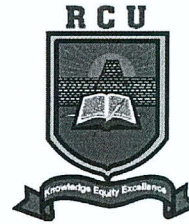


REFORMED CHURCH UNIVERSITY

(A REFORMED CHURCH IN ZIMBABWE INSTITUTION)

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RCU DEFERMENT FORM

Full Name: Reg. Number:

Part: Semester: Academic Year: Faculty:

Programme:

Address:

Date:...../...../..... Cell:..... Email:

Dear Sir/Madam

RE: APPLICATION FOR DEFERMENT OF STUDIES

.....
.....
.....
.....

Faculty Coordinator's Signature: Date:

Dean of Studies' Signature: Date:

Registrar's Signature: Date:

NB: Students must attach a copy of the current tuition fees statement.