

TENGERU INSTITUTE OF COMMUNITY DEVELOPMENT
Transcript Request Form

Note; Read The Instruction Provided In This Form Before You Apply

- 1.Candidate's Name (in capital letter)
.....
- 2.Candidate's Reg. No.
- 3.Email Address Postal Address
.....
- 4.Candidate's Phone No
- 5.Program/Course Transcript Required for;
.....
- 6.Year of Completion:
- 7.Payment Receipt No. or Control no. :
- 8.Signature.....Date.....

Transcripts Requirements

1. The Candidate's particulars given in this form should correspond with those appearing in the certificates issued during reporting date.
2. The Transcript will only be Issued if the candidates signed this application form
3. The form will be submitted to the admission officer for process the Transcript
4. The Candidate's should ensure he/she has paid the Transcripts fee that is 20,000
5. All payments should be made though provided Institute Control number. Cash will not be received in any office in the Institute for this purpose.
6. The Candidate's Transcript will be ready for collection within 3 working days from the day of applying
7. The delivery of the Transcripts shall be made in person to the candidates or other person authorized in writing
8. If to be posted, provide name and address BUT the Institute will not bear any responsibility in case of lost and any cost for post processing.
9. Attachments
 - a. A copy of payment receipt
 - b. A copy of filled Clearance form