



## INTRA-AFRICA Academic Mobility Scheme TRANSCRIPT OF RECORDS<sup>i</sup>

Start and end dates of the study period: from [day/month/year] ..... to [day/month/year] .....

<b>Student</b>	Last name(s)	First name(s)	Date of birth	Nationality	Sex [M/F]	Study cycle	Field of education
<b>Home Institution</b>	Name	Faculty/Department	Address	Country	Contact person name/email/phone		
<b>Host Institution</b>	Name	Faculty/Department	Address	Country	Contact person name/email/phone		

### Transcript of Records at the Host Institution

	Component code (if any)	Component title at the Host Institution (as indicated in the course catalogue)	Was the component successfully completed by the student? [Yes/No]	Number of credits (or equivalent)	Grades received at the Host Institution
Table C <sup>ii</sup> After the mobility					
					Total: ...

Approval	Name	Position	Date	Signature	Official stamp
Responsible person at the Home Institution					

### Transcript of Records and Recognition at the Home Institution

	Component code (if any)	Title of recognised component at the Home Institution (as indicated in the course catalogue)	Number of credits (or equivalent) recognised	Grades registered at the Home Institution (if applicable)
Table D After the mobility				
				Total: ...

Recognition	Name	Position	Date	Signature	Official stamp
Responsible person at the Home Institution					

<sup>i</sup> This document is not valid without the signature of the responsible person (e.g. registrar/dean/administration officer) and the official stamp of the Host and Home Institution.

<sup>ii</sup> Additional rows and columns can be added as needed in all tables.