



RESULT UPLOAD FORM

(To be processed by the Department)

SESSION/SEMESTER COURSE(S) TAKEN: _____ (i.e. 18/19.2 for 2nd Semester 2018/2019) DATE _____

MATRIC NO: _____ STUDENT'S NAME: _____ STUDENT'S LEVEL: _____

DEPARTMENT: _____ STUDENT'S PROGRAM: _____

STUDENT'S SIGNATURE: _____ PHONE NO: _____ WHY UPLOAD OPTION? _____

COURSE CODE	COURSE TITLE	COURSE UNIT
1.....
2.....
3.....
4.....
5.....
6.....
7.....
8.....
9.....
10.....

Total unit for the Semester: _____

FOR OFFICIAL USE: (Obtain signatures in the order listed below)

THE COURSE ADVISOR: _____
Name _____
Signature & Date

THE H.O.D: _____
Name _____
Signature & Date

THE DEAN: _____
Name _____
Signature & Date

THE SCHOOL OFFICER _____
Name _____
Signature & Date

THIS DOCUMENT SHOULD BE SENT TO THE REGISTRY BY THE SCHOOL OFFICER AFTER SIGNING

*Fees payment Confirmation: Applicable Not Applicable Confirmed Not Confirmed Reason _____
Registry Registry Bursary Bursary

THE DEPUTY BURSAR: _____
Name _____
Signature & Date

* Request confirmed ready for approval by the SVP

THE REGISTRAR: _____
Name _____
Signature & Date

THE SVP: _____
Name _____
Signature & Date

NOTE: 1. Attach the raw score for all students registered in the course(s) listed for the Semester with the current stamp and signature of HOD
2. ONLY courses taken IN ONE SEMESTER should be listed on each form