**Examination & Evaluation Centre**

**Application for Examinations of Internal**

**Programs University of Vocational Technology**

Course :

Examination - Year & Semester (Repeat) :

1. Name in Full :
2. National Identity Card No :
3. Reg. No./Index No :
4. Personal Address :
5. Student ID No : E-Mail :
6. Telephone No :
7. Subjects/ Modules applied for :

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| --- | --- | --- | --- | --- | --- |
|  | **Subject/Module** | **Approval**  **of the**  **lecturer** |  | **Subject/Module** | **Approval**  **of the**  **lecturer** |
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Date:

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| **Office use only**  1. Attendance ……………………………………………………………………  2. Course fee …………………………………………………………………….  3. Hostel fee ……………………………………………………………………..  4. Clearance from the Library ……………………………………………….. |

Applicant’s Signature

The candidate is eligible/not eligible to sit for the Examination

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Course Coordinator Head - Examination & Evaluation Centre