MASENOUNIVERSITY

OFFICE OF THE REGISTRAR – ACADEMIC & STUDENT AFFAIRS

STUDENT COURSE REGISTRATION FORM

(COMPLETE IN DUPLICATE)

Name:…….. **Reg. Number:**……

Semester:…… **Year of Study:**……

SUBJECT CODE	COURSE	STUDENT SIGNATURE	H.O.D SINGNATURE

Date:…….. **Dean of School**……

FOR OFFICIAL USE ONLY

Office of the Registrar, Academic and Student Affairs

Officer Receiving…….. **Signature**……..**Date:**……

2015/2016