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

2017/2018

Date:…….. **Dean of School**……

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Office of the Registrar, Academic & Student Affairs

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