FACULTY OF GRADUATE STUDIES – KDU

MASTER OF………………………………………………………-20…./20….

APPLICATION FOR THE SEMESTER…….EXAMINATION

PROPER / REPEAT EXAMINATION

Index No:
(For office use only)

1. Full Name (Mr./Miss./Ms.)
   :………………………………………………………………………………..

2. Permanent Address:……………………………………………………………………

3. National ID Card No: ……………………………………………

4. Contact No:
   Residence…………………………..…………..Office…………………..……...

5. Registration No   :………………/………………/……………...

MODULE CODE	NAME OF THE MODULE	NO OF CREDITS	GPA	NGPA	ELECTIVE	OPTIONAL
			PLEASE TICK (√)			

Ideclarethattheabovestatementsaretrueandaccuratetothebestofmyknowledgeand belief and please register myself for above subject modules of year…………………

………/………/…………..   …………………………
Date   Signature of Candidate

Note: Please submit your duly filled application on or before 18th November 2023 to the relevant Programme E mail address only.

FOROFFICEUSEONLY

1. To be filled by the Senior Assistant Bursar – FGS

	Payment Slip No	Signature
Semester Fee / Course Fee/ Installments		
Reregistration fee		
Repeat Exam fee		
The above candidate has paid / has not paid the course fee / relevant repeat exam fees.	…………………………………………………….. Signature of the Senior Assistant Bursar - FGS	

2. To be filled by the Programme Coordinator

Subject code	Subject	Assignment Submitted / Not Submitted	Attendance Percentage
I certify that the above given information are correct.		………………………………………… Programme Coordinator	

3. To be filled by the Senior Assistant Registrar – FGS

The candidate is eligible / not eligible for the examination.

…………………………………….
Senior Assistant Registrar
Faculty of Graduate Studies