



# PENTECOST UNIVERSITY

(Academic Affairs Section)

RESIT/SUPPLEMENTARY REGISTRATION FORM

(2019/2020 Academic Year-SECOND SEMESTER/TRIMESTER)

**Instructions:** Please fill in all requested information neatly and completely in capital letters. For your registration to be considered, you must complete all items and pay your resit/supplementary fee (s). Return registration form to the Academic Affairs Section.

NAME: ----- STUDENT ID: -----  
SURNAME FIRST NAME OTHER NAME

PROGRAMME: -----CURRENT SCHOOL (eg. Reg/Even :) -----

CURRENT LEVEL: ----- SEMESTER/TRIMESTER: ----- ACADEMIC YEAR: -----

PERMANENT ADDRESS: -----

TELEPHONE: ----- EMAIL: -----

**RESIT/SUPPLEMENTARY COURSE (S):**

No	COURSE CODE	COURSE NAME	RESIT SCHOOL	EXAM TYPE (E.g. Resit or Supplementary)	RECEIPT #
1					
2					
3					
4					
5					

*PLEASE KEEP A COPY OF THE RECEIPT & FORM, AND ATTACH A COPY OF RECEIPT WITH THIS FORM FOR SUBMISSION.*

**STUDENT'S SIGNATURE:** ----- **DATE:** -----

## Office Use Only

Examination Officer's: -----

Signature: -----

Date: -----