

LINCOLN COLLEGE

EXAMINATION REGISTRATION FORM

Clearly fill the form below and ensure to indicate the courses registered for your current semester. Write in BLOCK Letters and use Black ink pen. Make sure to fill all the fields provided. Incomplete forms will not be accepted. Student must get this form signed by the respective HODs before submitting it.

STUDENT NAME:			
STUDENT ID NO.:		STUDENT TEL:	
PROGRAM OF STUDY:			SEMESTER:
EXAMINATION TYPE:	<input type="checkbox"/> MID-TERM	<input type="checkbox"/> FINAL (END-OF-SEMESTER)	
EXAMINATION DATE:	START DATE: (D/M/Y)	END DATE: (D/M/Y)	
No.	MODULE NAME	MODULE CODE	CREDIT
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

STUDENT SIGNATURE: _____ SUBMISSION DATE: _____

REGISTRATION AUTHORIZATION

 DR. J. PRAMANIK
 FINANCE DEPARTMENT

 DR. A. PRAMANIK
 STUDENT AFFAIRS DEPARTMENT

 DR. T. PRAMANIK
 ACADEMIC DEPARTMENT