

3. UTM EXAMINATION DETAILS

(A)

Registration Number:	
Year of Examination:	
Subject (s)	Score
Use of English	
Aggregate	

(B) PREVIOUS CHOICES

Choice	Institution	Course	Course Code
1 st Choice			
2 nd Choice			

4. NEW CHOICE: PLEASE STATE UNIVERSITY/COURSE

Institution	Course

5. ATTESTATION

I.....DO SOLEMNLY DECLARE THAT THE INFORMATION ABOVE IS CORRECT/TRUE TO THE BEST OF MY KNOWLEDGE.

.....
SIGNATURE

.....
DATE

6. FOR OFFICIAL USE

NAME, SIGNATURE AND DATE

Checked by	
Approved by	
Remarks	

NOTE:

This form should be submitted in triplicates. Attach photocopies of O' Level Results/ JAMB Slip/Results and receipts of purchase.

ANY FALSE DECLARATION RENDERS THIS FORM/ADMISSION INVALID