

IGBINEDION UNIVERSITY, OKADA CLEARANCE FOR REGISTRATION OF FRESH/RETURNING STUDENTS 2020/2021 SESSION PERSONAL DATA

Name:				
Surname		First Name	Other Names	
College/Department:		Level:	.Mat. No:	
PhoneNo:		E-mail (Self):		
For Fresh Students (Please co. BURSARY STATION	me with the origi	nals and photocopies of your cred	dentials for Registration.	
	ment for the	following: (Tick where appro	unniata)	
		(6.) Book Deposit Fee		
		(7.) Hostel Dues		
(3.) Registration Fee	[]	(8.) PCF-Levy	[]	
(4.) Development Fee(5.) Municipal Fee	[]	(9.) Other Charges	[]	
I certify that the above nam	ed student has	satisfied the financial require	<u>:ments</u> for registration	
Name of Bursary Staff			Signature, Date and Stamp.	
REGISTRY CLEARANCE I certify that the credentials o	f the student hav	ve been screened by me and the	student is hereby cleared.	
Name of Registry Staff		Signat	ure, Date and Stamp.	
LIBRARY CLEARANCE I certify that the above name	ied student <u>has</u>	registered with the Library		
Name of Library Staff			Signature, Date and Stamp.	
COLLEGE CLEARANCE				
	ed student <u>has</u>	been registered with the coll	<u>ege</u> .	
Name of College Officer			ure, Date and Stamp.	
ICT CLEARANCE		-	·	
I certify that the above nam	ed student has	completed his/her ICT registr	ation.	
Name of ICT Staff	•••••		Signature, Date and Stamp.	
ELIGIBILITY/CONGRATUL	ATION STATI	ON		
For: Registrar			Signature, Date and Stamp.	

N.B: Duly completed clearance form should be returned to the College Officer.





JGBINEDION UNIVERSITY, OKADA

Course Registration Clearance

(Fresh Student - 2020/2021 Session)

Name of (Surname	Student:
•	epartment:Level:
Phone	No:e-mail:
Congratu Universit	lations on your final registration as a student of Igbinedion y.
Welcome	to a brand new world.

Registrar