



KWARA STATE UNIVERSITY, MALETE
STUDENT AFFAIRS UNIT

STUDENT ACCOMMODATION EXEMPTION FORM 2017/2018

FULLNAME.....

COURSE.....LEVEL.....COLLEGE.....

MATRIC NO.....PHONE.....EMAIL.....

SEMESTER.....SEX.....

REASON FOR EXEMPTION.....

.....

PLS ATTACH EVIDENCE(s).....

.....

CONTACT ADDRESS.....

PARENT/GUARDIAN.....PHONE.....

ADDRESS.....

DECLARATION

I.....Certify that above information is correct

SIGNATURE.....DATE.....

OFFICIAL USE ONLY

APPROVED ()

NOT APPROVED ()

This is to certify that.....With Matriculation number.....
Of the department of.....is exempted from staying the general rules by the
Vice Chancellor. He / She can proceed for registration.

.....

Dean Signature / Date