NATIONAL OPEN UNIVERSITY OF NIGERIA
DIRECTORATE OF EXAMINATIONS AND ASSESSMENT
2020_2 EXAMINATION CLEARANCE FORM

Affix

Current

Passport

Photo

Section A (to be completed by student)

Name of Student ……..

Matriculation No:……...

Study Centre:……

Faculty: ……..

Programme:…….....

Signature/Date: ……

List of Registered Courses:

1.
2.
3.
4.
5.
6.
7.
8.
9.
10.
11.

SECTION B – Study Centre Clearance (to be completed by Study Centre Registration Officer)

I have seen this student's Registration and Examination Slip. He/She is CLEARED/NOT CLEARED to sit for Examination

Name of Officer: ……

Designation:……..

Signature/Date: …….. ……

SECTION C – Bursary Clearance (to be completed by Study Centre Accountant)

I have seen this student's Evidence of payment. He/She is CLEARED/NOT CLEARED to sit for Examination

Name of Officer: ……

Designation:……

Signature/Date: ……..

SECTION D – Study Centre Director's Clearance (to be completed by Study Centre Director)

Student is CLEARED/NOT CLEARED

Name of Study Centre Director:……

Signature/Date: ……