

KREECK ACADEMY SCHOOL OF COMPUTING



STUDENT COURSE REGISTRATION FORM

Registration Number: STUDENT

Name: TEST STUDENT

Session: SESSION 1 Level: Bachloar

FIRST SEMESTER Name, Siganture of

S/No	Course Code	Course Title	Unit	course lecturer & Date
1	PHYGR10	Phisical Science	20	
2	MATHSP1GR10	Mathematics p1	10	

Total Second First Credit: 30

SECOND SEMESTER Name, Signature of

				course lecturer &
S/No	Course Code	Course Title	Unit	Date

Total Second Semester Credit: 0

CERTIFICATION OF REGISTRATION: I certify that **TEST STUDENT** has been duly registered for the **Bachloar level** of study in the department of COMPUTING & PROGRAMMING. Courses and credits registered are as approved by the senate of the Kreeck Academy