

UMMUL-QURA HIGH SCHOOL

Arowona Bus-Stop, Akanran Road, Ibadan, Oyo State Contact: 08053776177, 07042950010 E-mail: ummulquraschl@gmail.com, ummulqr@yahoo.com



EXAMINATION VENUES Venue Name: SSS 3B LIST Day:

	Student Information			Examination Papers										Remarks	
SN	Student Name and	ID	-1-	-2-	-3-	-4-	-5-	-6-	-7-	-8-	-9-	-10-	Class	Rem	
1	ABDULAZEEZ AISHAT	AA/S/21/6263											SSS 2		
2	ABDULKABIR HABEEBAT	AH/S/21/6264											SSS 2		
3	ABDULKAREEM ROKEEBAT	AR/S/21/6265											SSS 2		
4	ABDULLATEEF AISHAT	AA/S/21/6266											SSS 2		
5	ABDULSATAR YUSROH	AY/S/21/6267											SSS 2		
6	ABDULWAHEED MUMINAH	AM/S/21/6268											SSS 2		
7	ADEAGBO KHADIJAH	AK/S/21/6269											SSS 2		
8	ADESINA FAWZIYAH	AF/S/21/6270											SSS 2		
9	ADEWUYI ZAYNAB	AZ/S/21/6271											SSS 2		
10	ADIATU MAHRUFAH	AM/S/21/6272											SSS 2		
11	AKANDE ZAINAB	AZ/S/21/6273											SSS 2		
12	AKINSOLA AZEEZAT	AA/S/21/6274											SSS 2		
13	AKINTARO HALIYAT	AH/S/21/6275											SSS 2		
14	AL-AMEEN ALIMAH	AA/S/21/6277											SSS 2		
15	AL-YAQEEN FAIZAH	AF/S/21/6278											SSS 2		
16	ALABI FATHIA	AF/S/21/6276											SSS 2		
17	ASHIR RODIYAH	AR/S/21/6279											SSS 2		
18	ATANDA AISHAT	AA/S/21/6280											SSS 2		
19	ATANDA MUBINAT	AM/S/21/6281											SSS 2		
20	BADMUS ROUFAH	BR/S/21/6282											SSS 2		
21	BASHIR AISHAT	BA/S/21/6283											SSS 2		
22	BELLO ISIAMIYYAH	BI/S/21/6284											SSS 2		
23	DUROJAYE ALIMAT	DA/S/21/6285											SSS 2		
24	HAMZAT AISHAT	HA/S/21/6286											SSS 2		
25	HUSSEIN HIKMAT	HH/S/21/6287											SSS 2		
26	IDOWU NAFISAH	IN/S/21/6288											SSS 2		
27	MAKINDE ROKEEBAT	MR/S/21/6289											SSS 2		
28	MUDATHIR AASIYAT	MA/S/21/6290											SSS 2		
29	OBISESAN HIKMOT	OH/S/21/6291											SSS 2		
30	OKUNOLA AMINAH	OA/S/21/6292											SSS 2		
31	TAJUDEEN ZAINAB	TZ/S/21/6293											SSS 2		
32	YISAU MARYAM	YM/S/21/6294											SSS 2		
33	ZUBAIR MARYAM	ZM/S/21/6295											SSS 2		
-			S	Superv	risors										
	Name:						Na	ame:_							
	SIGN:				SIGN:										
-	DATE:														
	Name:				Name:										
	SIGN:			SIGN:											
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