

EZOD UNIVERSITY OF TECHNOLOGY, ADAMA SCHOOL OF ELECTRICAL ENGINEERING & COMPUTING



DEPARTMENT OF COMPUTER SCIENCE & ENGINEERING

STUDENT COURSE REGISTRATION FORM

Registration Number: STUDENT

Name: ASVCASV ASVASV

Session: FBFDBFDB Level: Bachloar

FIRST SEMESTER Name, Siganture of

| S/No | Course Code | Course Title | Unit | course lecturer & Date |
|------|-------------|--------------|------|-------------------------|
| 1 | 14 | dfbdfb | 2 | |

Total Second First Credit: 2

SECOND SEMESTER Name, Signature of

| | | | | course lecturer & |
|------|-------------|--------------|-------|-------------------|
| S/No | Course Code | Course Title | Linit | Date |
| | | | Unit | |

Total Second Semester Credit: 0

CERTIFICATION OF REGISTRATION: I certify that **ASVCASV ASVASV** has been duly registered for the **Bachloar level** of study in the department of COMPUTER SICENCE & ENGINEERING and that the courses and credits registered are as approved by the senate of the University