

## **COURSE REGISTRATION FORM**

LAGOS STATE UNIVERSITY, CAMPUS

**MATHEMATICS** 

SECOND SEMESTER 2023/2024 SESSION



## **EXAM FORM**

Surname: CHIBUOGWU

Matriculation Number:

200551029

Other Names: CHUKWUEMEKA VICTOR

Address (Current): 2 PROGRESS AVENUE OFF ILASA ROAD IYESI OTA

**OGUN STATE** 

EMail:

Victorchibuogwu33@gmail.com

Phone Number: **08148374084** 

Level: Bursary Number.: **200551029** 

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Date printed: 30-07-2024

Student's Signature:.....

## **COURSE DETAILS**

COURSE CODE	COURSE TITLE	UNITS	STATUS
MAT 302	Theory of Modules	3	С
MAT 322	Dynamics of a Rigid Body	3	С
MAT 362	Probability Distribution Theory and Elementary Limit Theorems	3	С
MAT 402	Advanced Algebra II	3	R
MAT 414	General Topology	3	С
MAT 498	Project in Mathematics	4	С
	TOTAL NUMBER OF UNITS:	19 Units	

I certify that the above named student has submitted five (5) copies of his harmattan semester Exam form and is qualified to register the above listed courses for the harmattan semester.

## For Official Use

1.	H. O. D's Signature & Date:	

Please note that registration is not complete until registration form is endorsed by the H.O.D