

**SULE LAMIO UNIVERSITY**

PMB 048 kafin Hausa, Jigawa state, Nigeria

www.slu.edu.ng*(office of the Registrar)***PRE-REGISTRATION SCREENING FORM**

FULL NAME: _____

(IN BLOCK LETTTERS) (First name) (Middle name) (Surname)

Date of Birth _____ Gender _____

Nationality _____ State of origin _____ LGA _____

UTME/DE NO _____ UTME Score _____ DE Point/Grade _____

Programme admitted into _____

O'LEVEL RESULT (CREDIT LEVEL ONLY) EXAMINATION NO(S): _____ Year(s) _____					'A' LEVEL RESULT EXAMINATION NO: _____ Year(s): _____				
S/N	SUBJECT	WAEC	NECO	OTHERS(Specify)	SUBJECT	NCE	DIPLOMA	IJMB	OTHERS(Specify)
1.									
2.									
3.									
4.									
5.									
6.									
7.									
8.									
9.									
10.									

Students signature: _____

Date: _____

(FOR OFFICIAL USE)

Remark by registration officer:

☐ [] CLEARED☐ [] NOT CLEARED

Name _____

Signature and Date _____