**MAKERERE UNIVERSITY**

**COLLEGE OF COMPUTING AND INFORMATION SCIENCES**

RESULTS’ COMPLAINT FORM

1. STUDENT PARTICULARS

NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­\_\_\_\_

REG No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STUDENT No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

COURSE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ YEAR OF STUDY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TEL No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ e-mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

LECTURER’ NAME(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. NATURE OF COMPLAINT [Tick where appropriate]

1. Missing Coursework \_\_\_\_\_\_\_ 2. Missing Exam \_\_\_\_\_\_\_

3. Missing all \_\_\_\_\_\_\_ 4. Remarking \_\_\_\_\_\_\_

5. Others [Specify] \_\_\_\_\_\_\_

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| --- | --- | --- | --- | --- |
| Course code | Course name | Academic Year of sitting | Semester | Course Lecturer |
|  |  |  |  |  |

1. STUDENT

Signed ……………………………………………………………………Date ……………………………

1. Official Use only

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| REG No. | Name | CW/40 | EX/60 | FN/100 | COMMENT |
|  |  |  |  |  |  |

1. Signature (Lecturer) ………………………………………… Date ………………………………………
2. Approved by

Name …………………………………………………Signature ……………………………. Date ………………

(HoD)