**NNAMDI AZIKIWE UNIVERSITY, AWKA**

**SCHOOL OF POSTGRADUATE STUDIES**

**STUDENT’S PROGRAMME STATUS REPORT**

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| **Session:** |  |
| **Reg. No.:** |  |

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| **Department:** |  |
|  |  |
| **Faculty:** |  |

1. **Student’s Details**

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|  | Name: |  | Sex: Male/Female |
|  | (Surname) | (Other Names) |
|  | Phone Number: |  | Email: |  |
|  | Permanent Address: |  |
|  | Mode of Study: | Full Time:

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| 1. | NAME IN FULL (SURNAME FIRST): |  |
|  2. | PHONE NUMBER AND EMAIL ADDRESS: |  |
| 3. | PERMANENT HOME ADDRESS:  |  |
|  |  |
| 4. | CORRESPONDENCE ADDRESS: |  |
|  |  |
| 5. | DATE OF BIRTH: |  |
| 6. | AGE AS AT LAST BIRTHDAY: |  |
| 7. | SPONSORSHIP: | 1. Name of Sponsor:
 |  |
|  |  | 1. Address of Sponsor:
 |  |
| 8. | QUALIFICATION: | Degree/Qualification Obtained: |
|  |  | **University** | **Degree** | **Course** | **Class of Certificate** | **Date** |
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| 9. | OTHER QUALIFICATIONS: | (State subject, year, class of degree and University/Institution) |
|  |  | **Institutions** | **Certificate Obtained** | **Course/Subject****Area of Specialization** | **Class of Certificate** | **Date** |
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| 10. | COURSE APPLIED FOR: |  |
| 11. | DEPARTMENT: |  |
| 12. | FACULTY: |  |
|  |  |  |
|  |  | Signature of Applicant | Date |

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|  |  | Signature of Applicant | Date |

 | Part Time:

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| 11. | DEPARTMENT: |  |
| 12. | FACULTY: |  |
|  |  |  |
|  |  | Signature of Applicant | Date |

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1. **Programme Details**

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| Programme (PGD, MASTER, PhD): |   |
| Name of Supervisor I: |  |
| Name of Supervisor II: |  |
| Year of Commencement of Programme: |  |
| Any deferment of programme? If yes, when? |  |

1. **Present Stage of Programme**
	1. **Coursework:**

|  |  |
| --- | --- |
| First semester courses: |   |
| Second semester courses: |  |
| Date of last coursework: |  |
| Date of publication of Coursework results: | 1st Semester: |  |  |  | 2nd Semester: |  |  |  |

* 1. **Seminar:**

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| --- | --- | --- |
|  |  |  |
| Seminar I | Yes |  | No |  | Not Applicable |  |
|  |  |  |  |  |  |  |
| Seminar II | Yes |  | No |  | Not Correct |  |

* 1. **Supervision:**

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| --- | --- |
| Present Chapter of your thesis/dissertation: |  |
| Submitted the chapter to your supervisor on: |  |
| Collected the last submitted chapter on: |  |
| Date of last contact with supervisor/department: |  |

1. **Thesis/Dissertation:**

|  |  |
| --- | --- |
| Date of Choosing/Approval of Title: |   |
| Date of Submission of first part of Thesis/Dissertation for proposal: |  |
| Date of proposal defence: |  |
| Date of submission of thesis/dissertation for internal defence: |  |
| Date of Internal Defence: |  |
| Date of submission of thesis/dissertation for external defence: |  |
| Date of External Defence: |  |
| Date of Submission of Final Corrected copy of Thesis/Dissertation:  |  |
| Have you collected your result? (Yes/No) |  |

1. **Payments**

|  |  |
| --- | --- |
| Date of last payment of fees: |  |
| For what session/year was the last payment? |  |

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|  |  |  |
| **Signature of Faculty Sub-Dean** |  | **Date** |