**NNAMDI AZIKIWE UNIVERSITY, AWKA**

**COLLEGE OF POSTGRADUATE STUDIES**

**STUDENTS’ EXAMINATION ATTENDANCE REGISTER**

(*Use one sheet for only one department and for only one course)*

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| **Session:** | |  | | **Semester:** |  | | | | | **Date:** |  |
| **Department:** | | |  | | | **Course Code:** | |  | | | |
| **Course Title:** | | |  | | | | | | | | |
| **Venue:** |  | | | | | | **Time of Exam:** | |  | | |

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**Invigilator(s):**

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| Number of scripts collected (in words): | |  | | |
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| Collected by (Name): |  | | Signature/ Date: |  | |