**NNAMDI AZIKIWE UNIVERSITY, AWKA**

**COLLEGE OF POSTGRADUATE STUDIES**

**REQUEST FOR CERTIFICATE**

(*To be completed by student for collection of certificate*)

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

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

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|  | **Name:** |  | | | | | | | | **Sex: Male Female**   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | 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** | | |  |  | | |  | | | | | | | |  | | |  | |  | |  | | |  |  | | |  | | | | | | | |  | | |  | |  | |  | | |  |  | | |  | | | | | | | |  | | |  | |  | |  | | |  |  | | |  | | | | | | | |  | | |  | |  | |  | | |  |  | | |  | | | | | | | |  | | |  | |  | |  | | |  |  | | |  | | | | | | | | | | | | | | | | | | 9. | OTHER QUALIFICATIONS: | | | | (State subject, year, class of degree and University/Institution) | | | | | | | | | | | | | | | | |  |  | | | **Institutions** | | | | | **Certificate Obtained** | | | | **Course/Subject**  **Area of Specialization** | | | **Class of Certificate** | | **Date** | | | |  |  | | |  | | | | |  | | | |  | | |  | |  | | | |  |  | | |  | | | | |  | | | |  | | |  | |  | | | |  |  | | |  | | | | |  | | | |  | | |  | |  | | | |  |  | | |  | | | | |  | | | |  | | |  | |  | | | |  |  | | |  | | | | |  | | | |  | | |  | |  | | | | 10. | COURSE APPLIED FOR: | | | | | | |  | | | | | | | | | | | | | | 11. | DEPARTMENT: | |  | | | | | | | | | | | | | | | | | | | 12. | FACULTY: |  | | | | | | | | | | | | | | | | | | | |  |  |  | | | | | | | | | | | | | | | | | | | |  |  | Signature of Applicant | | | | | | | | | | | | Date | | | | | | | | 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** | |  |  | | |  | | | | | | | |  | | |  | |  | |  | |  |  | | |  | | | | | | | |  | | |  | |  | |  | |  |  | | |  | | | | | | | |  | | |  | |  | |  | |  |  | | |  | | | | | | | |  | | |  | |  | |  | |  |  | | |  | | | | | | | |  | | |  | |  | |  | |  |  | | |  | | | | | | | | | | | | | | | | | 9. | OTHER QUALIFICATIONS: | | | | (State subject, year, class of degree and University/Institution) | | | | | | | | | | | | | | | |  |  | | | **Institutions** | | | | | **Certificate Obtained** | | | | **Course/Subject**  **Area of Specialization** | | | **Class of Certificate** | | **Date** | | |  |  | | |  | | | | |  | | | |  | | |  | |  | | |  |  | | |  | | | | |  | | | |  | | |  | |  | | |  |  | | |  | | | | |  | | | |  | | |  | |  | | |  |  | | |  | | | | |  | | | |  | | |  | |  | | |  |  | | |  | | | | |  | | | |  | | |  | |  | | | 10. | COURSE APPLIED FOR: | | | | | | |  | | | | | | | | | | | | | 11. | DEPARTMENT: | |  | | | | | | | | | | | | | | | | | | 12. | FACULTY: |  | | | | | | | | | | | | | | | | | | |  |  |  | | | | | | | | | | | | | | | | | | |  |  | Signature of Applicant | | | | | | | | | | | | Date | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | 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. 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Address of Sponsor: | | | | | | |  | | | | | | | | | | | 8. | QUALIFICATION: | | | Degree/Qualification Obtained: | | | | | | | | | | | | | | | | | |  |  | | | **University** | | | | | | | | **Degree** | | | **Course** | | **Class of Certificate** | | **Date** | | |  |  | | |  | | | | | | | |  | | |  | |  | |  | | |  |  | | |  | | | | | | | |  | | |  | |  | |  | | |  |  | | |  | | | | | | | |  | | |  | |  | |  | | |  |  | | |  | | | | | | | |  | | |  | |  | |  | | |  |  | | |  | | | | | | | |  | | |  | |  | |  | | |  |  | | |  | | | | | | | | | | | | | | | | | | 9. | OTHER QUALIFICATIONS: | | | | (State subject, year, class of degree and University/Institution) | | | | | | | | | | | | | | | | |  |  | | | **Institutions** | | | | | **Certificate Obtained** | | | | **Course/Subject**  **Area of Specialization** | | | **Class of Certificate** | | **Date** | | | |  |  | | |  | | | | |  | | | |  | | |  | |  | | | |  |  | | |  | | | | |  | | | |  | | |  | |  | | | |  |  | | |  | | | | |  | | | |  | | |  | |  | | | |  |  | | |  | | | | |  | | | |  | | |  | |  | | | |  |  | | |  | | | | |  | | | |  | | |  | |  | | | | 10. | COURSE APPLIED FOR: | | | | | | |  | | | | | | | | | | | | | | 11. | DEPARTMENT: | |  | | | | | | | | | | | | | | | | | | | 12. | FACULTY: |  | | | | | | | | | | | | | | | | | | | |  |  |  | | | | | | | | | | | | | | | | | | | |  |  | Signature of Applicant | | | | | | | | | | | | Date | | | | | | | | 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. 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Address of Sponsor: | | | | | | |  | | | | | | | | | | 8. | QUALIFICATION: | | | Degree/Qualification Obtained: | | | | | | | | | | | | | | | | |  |  | | | **University** | | | | | | | | **Degree** | | | **Course** | | **Class of Certificate** | | **Date** | |  |  | | |  | | | | | | | |  | | |  | |  | |  | |  |  | | |  | | | | | | | |  | | |  | |  | |  | |  |  | | |  | | | | | | | |  | | |  | |  | |  | |  |  | | |  | | | | | | | |  | | |  | |  | |  | |  |  | | |  | | | | | | | |  | | |  | |  | |  | |  |  | | |  | | | | | | | | | | | | | | | | | 9. | OTHER QUALIFICATIONS: | | | | (State subject, year, class of degree and University/Institution) | | | | | | | | | | | | | | | |  |  | | | **Institutions** | | | | | **Certificate Obtained** | | | | **Course/Subject**  **Area of Specialization** | | | **Class of Certificate** | | **Date** | | |  |  | | |  | | | | |  | | | |  | | |  | |  | | |  |  | | |  | | | | |  | | | |  | | |  | |  | | |  |  | | |  | | | | |  | | | |  | | |  | |  | | |  |  | | |  | | | | |  | | | |  | | |  | |  | | |  |  | | |  | | | | |  | | | |  | | |  | |  | | | 10. | COURSE APPLIED FOR: | | | | | | |  | | | | | | | | | | | | | 11. | DEPARTMENT: | |  | | | | | | | | | | | | | | | | | | 12. | FACULTY: |  | | | | | | | | | | | | | | | | | | |  |  |  | | | | | | | | | | | | | | | | | | |  |  | Signature of Applicant | | | | | | | | | | | | Date | | | | | | |
|  | (Surname) | | | | | | | (Other Names) | | |
|  | **Phone Number:** | |  | | | | Email: | | | |
|  | **Permanent Address:** | | |  | | | | | | |
|  | **Degree or Diploma:** | | | | |  | | | | |
|  | **Mode of Study:** | | | | **Full Time:**   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | 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** | | |  |  | | |  | | | | | | | |  | | |  | |  | |  | | |  |  | | |  | | | | | | | |  | | |  | |  | |  | | |  |  | | |  | | | | | | | |  | | |  | |  | |  | | |  |  | | |  | | | | | | | |  | | |  | |  | |  | | |  |  | | |  | | | | | | | |  | | |  | |  | |  | | |  |  | | |  | | | | | | | | | | | | | | | | | | 9. | OTHER QUALIFICATIONS: | | | | (State subject, year, class of degree and University/Institution) | | | | | | | | | | | | | | | | |  |  | | | **Institutions** | | | | | **Certificate Obtained** | | | | **Course/Subject**  **Area of Specialization** | | | **Class of Certificate** | | **Date** | | | |  |  | | |  | | | | |  | | | |  | | |  | |  | | | |  |  | | |  | | | | |  | | | |  | | |  | |  | | | |  |  | | |  | | | | |  | | | |  | | |  | |  | | | |  |  | | |  | | | | |  | | | |  | | |  | |  | | | |  |  | | |  | | | | |  | | | |  | | |  | |  | | | | 10. | COURSE APPLIED FOR: | | | | | | |  | | | | | | | | | | | | | | 11. | DEPARTMENT: | |  | | | | | | | | | | | | | | | | | | | 12. | FACULTY: |  | | | | | | | | | | | | | | | | | | | |  |  |  | | | | | | | | | | | | | | | | | | | |  |  | Signature of Applicant | | | | | | | | | | | | Date | | | | | | | | 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. 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**Attachments:**

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| **i.** | **Statement of Result** |  |
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| **ii.** | **CPGS Form 043 (*Student Copy Transcript*)** |  |

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|  | Signature of Candidate |  | Date |

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Processed: Date: Signature:

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| Secretary, CPGS | Signature: | Date: |

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