

**FACULTY OF EDUCATIONAL STUDIES**

**APPLICATION FORM**

**COMPREHENSIVE EXAMINATION (CE) FOR MASTER PROGRAMME WITHOUT  
THESIS**

Applicant Information

1. Name of Applicant :  
Matric No. :  
Address :  
  
Telephone No. :  
Email :  
Fax No. :
  
2. Enrolment Semester : Semester: Year:
  
3. Courses and grades details (Please attached your full transcripts).

Compulsory Courses

	<u>Code Course</u>	<u>Course Name</u>	<u>Credit</u>	<u>Grade</u>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____

Main focus of the course

	<u>Course Code</u>	<u>Course Name</u>	<u>Credit</u>	<u>Grade</u>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____
6.	_____	_____	_____	_____
7.	_____	_____	_____	_____
8.	_____	_____	_____	_____
9.	_____	_____	_____	_____
10.	_____	_____	_____	_____

Elective courses

	<u>Course Code</u>	<u>Course Name</u>	<u>Credit</u>	<u>Grade</u>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____

Final Semester Courses

	<u>Course Code</u>	<u>Course Name</u>	<u>Credit</u>	<u>Grade</u>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	CGPA	:		
6.	Signature of student	:_____	Date	:_____
7.	Signature of advisor	:_____	Date	:_____
		(Signature and Stamp)		

This form must be submitted to the office of the Deputy Dean (Research and Graduate Studies) 2 weeks before end of the Semester .

Date of Received : \_\_\_\_\_  
Deputy Dean (Research and Graduate Studies)  
Faculty of Educational Studies