



T.A MARRYSHOW COMMUNITY COLLEGE
CHALLENGE EXAMINATION APPLICATION FORM



SCHOOL: Arts, Science and Professional Studies () / Applied Arts and Technology ()

NAME OF APPLICANT:

PROGRAMME:

SEMESTER: **ACADEMIC YEAR**

I will like to challenge for examination the following course(s):

NO.	COURSE NUMBER	COURSE NAME	CREDIT HOURS	TUTOR

APPROVING SIGNATORIES

TITLE	SIGNATURE	APPROVED	NOT APPROVED	DATE
REGISTRAR				
DEAN				
TUTOR				

EXAMINATIONS OFFICER:

DATE:

EXAMINATION DATE:

FOR OFFICIAL USE ONLY:

RECEIPT #.....

AMOUNT PAID: \$.....

SIGNATURE OF CASHIER: