

## SCHOOL OF POSTGRADUATE STUDIES KOGI STATE UNIVERSITY, ANYIGBA

The Dean, School of Postgraduate Studies, Kogi State University, Anyigba.

ACCEPTANCE OF OFFER	SESSION
NAME:	
COURSE FOR WHICH ADMITTED:	
FACULTY:	
DEPARTMENT:	
ADMISSION NUMBER:	SESSION:
CONTACT ADDRESS:	
TEL	/GSM NO
With reference to your letter of provisional admis I hereby accept the offer of admission to read:	
Course in the University starting from the:	Academic year.
DECLARAT	ΓΙΟΝ
Having read the necessary Regulations, I do soler	nnly declare that I shall abide by them.
Signature	Date



## SCHOOL OF POSTGRADUATE STUDIES KOGI STATE UNIVERSITY, ANYIGBA

## INTERNAL MEMORANDUM

From:	Admissions Officer	To: Records Officer
Ref:	KSU/PGS/AC//001	Date:
•••••	ADMISSIC	ON EXERCISE
CLEA	RANCE CERTIFICATE/AUTHO	ORITY TO PAY (In Triplicate)
1.	Name:	
	Department:	Degree:
2.	I have checked the following and	d they are found to be in order.
	Original Certificates	
	(a)	
	(b)	
	(c)	
	(d)	
	(e)	
	(f)	
3.	N.Y.S.C.	
	<ul><li>(a) Discharge Certificate</li><li>(b) Exemption Certificate</li><li>(c) Not Required</li></ul>	
4.	Transcript	
	Please register after necessary pa	ayments have been made

For: Admission Officer

cc: Accounts Officer, PGS



## SCHOOL OF POSTGRADUATE STUDIES, KOGI STATE UNIVERSITY, ANYIGBA ADMISSION OFFICE.

	Date:
The Dean, School of Postgraduate Studies, Kogi State University, Anyigba.	
Dear Sir,	
ORIGINAL CREDENT	ING FOR PRESENTATION OF TALS/TRANSCRIPTS FOR SE FOR 2008/2009 SESSION
I,	, offered
provisional admission to the Departm	ent of
hereby promise to provide the original cop	pies of my (a)
(b) (	c) by the
beginning of the 1st semester examination	(27th April, 2009) failing which I should not be
allowed to take 1 <sup>st</sup> semester examination.	
Thank you.	
Yours faithfully,	
Signature:	
Name:	