

REDEEMER'S UNIVERSITY

PMB 230, Ede Osun State. www.run.edu.ng

Office of the Registrar

APPLICATION FOR TRANSFER TO REDEEMER'S UNIVERSITY

To be completed in duplicate and in capital letters

PART I				
Name:First Name		Middle Name	 Surname	
i ii st ivaine		Wilddie Name	Surname	
Date of Birth:		Nation	nality:	
Contact Address:				
Name of Present Institution	:			
Course of Study/Matriculati	on No:			
Year/Level of Study:				
Course to which transfer is b	peing sought:			
Reason(s) for seeking transf	er:			
Educational Qualifications				
		ninations and Grades Obt		
SSSCE (WAEC/NECO)	HSC/A'L	ND/NCE	OTHERS	

NOTE TO APPLICANT

- 1. Applicant should request present institution to forward an official copy of his/her Academic Transcript to: The Registrar, Redeemer's University, PMB 230 Ede, Osun State.
- 2. Only successful applications would be acknowledged.

PART II (To be completed by the appropriate Officers of the present institution) Comment(s) and Recommendation of Head of Department:				
Name & Signature:	Date:			
Comment(s) and Recommendation of Dean of Faculty/College/School:				
Name & Signature:	Date:			
Comment(s) and Recommendation of Registrar:				
Name & Signature:	Date:			
PART III (To be completed by appropriate Officers in Redeemer's University)				
Comment(s) and Recommendation of Head of Department:				
Name & Signature:	Date:			
Comment(s) and Recommendation of Dean of College:				
No con O. Circusto es	D.L.			
Name & Signature:	Date:			
Comment(s) and Recommendation of Registrar:				
Name & Signature:	Date:			
VICE-CHANCELLOR				
Application Approved/ Not Approved				
Signature:	Date:			