



## APPLICATION FOR RE-MARKING OF EXAMINATION OR COURSEWORK (RMEC)

Students are advised to consult the Undergraduate Student Handbook and the Examinations Regulations on the institution's website to be appraised of the regulations governing the remarking of scripts. Submit the completed to the Examinations and Transcript Unit with the receipt from the Bursary. The application will not be processed unless the fee is paid.

### SECTION I - STUDENT INFORMATION

NAME: \_\_\_\_\_  
First Name Middle Name Last Name

TITLE:  Rev.  Dr.  Mr.  Mrs.  Miss  Ms.

ID NUMBER: \_\_\_\_\_ E-MAIL ADDRESS: \_\_\_\_\_

TEL. NUMBERS: \_\_\_\_\_

### SECTION II - PROGRAMME AND COURSE INFORMATION

FACULTY:  Education  Humanities and Liberal Arts  Science and Technology

DEPARTMENT: \_\_\_\_\_

NAME OF PROGRAMME: \_\_\_\_\_

SPECIALIZATION: \_\_\_\_\_

CURRENT YEAR OF PROGRAMME:  1  2  3  4  other

ARE YOU A FINALIZING STUDENT?  Yes  No

ENROLMENT STATUS :  Full-time (day)  Full-time (evening)  Part time

WHEN DID YOU LEARN OF THE GRADE? \_\_\_\_\_

### DETAILS OF COURSE

COURSE CODE	COURSE TITLE	ACAD. YEAR	SEM.

I hereby request re-marking of the script(s) of  Examination  Coursework in the course(s) named above.

\_\_\_\_\_  
*Signature of Applicant* \_\_\_\_\_  
*Date*

### SECTION III - OFFICIAL USE ONLY

RECEIPT INFORMATION: Amount Paid: \_\_\_\_\_ Receipt No.: \_\_\_\_\_ Date: \_\_\_\_\_

**Please Note: A copy of every receipt not generated electronically, must be affixed to this form.**

### REGISTRAR'S RESPONSE

\_\_\_\_\_  
*Name of the Registrar* \_\_\_\_\_ \_\_\_\_\_  
*Signature of the Registrar* Date