

ABUBAKAR TAFAWA BALEWA UNIVERSITY, BAUCHI

School of Postgraduate Studies

P.M.B, 0248 Bauchi

VICE CHANCELLOR:

PROF. M. A. ABDULAZEEZ
B. TECH (HONS) PHYSICS FUT, M. Sc (Uni Ibadan)
Ph.D. (ATBU, BAUCHI), FNIP, MSESN



DEAN:

Prof. S. D. Abdul,
B.Sc (UniJos), M.Sc (ABU) MPhil & Ph.D.
(Cambridge, UK)

SECRETARY:

Mal. Ahmad H. Abubakar
B.Sc. Sociology (UniJos).

Our Ref: ATBU/SPGS/ADM/031

Date: _____

APPLICATION FOR EXTENSION OF REGISTRATION

Extension of Registration: Applies to candidates whose residency has just expired, the duration is for one session only.

SECTION A (to be completed by the student)

1. Name:.....
2. Reg. No:.....
3. Faculty:.....
4. Department:.....
5. Area of Study:.....
6. Degree in View:.....
7. Date of First Registration:.....
8. Type of Extension:.....
9. State duration and reason for extension of Registration:.....
.....
.....

Signature/Date:.....

SECTION B (to be completed by the Chairman, Supervisory Committee)

1. Name:.....
2. Rank:
3. Briefly state the progress of work:
.....
.....

Signature/Date:.....

SECTION C (to be completed by the Head of Department on behalf of the PG Committee of the Department)

1. Name:.....
2. Statement of Recommendation:.....
.....

Signature/Date:.....

SECTION D (to be completed by the Dean of the Faculty on behalf of the PG Committee of the Faculty)

1. Name:.....
2. Statement of Recommendation:.....
.....

Signature/Date:.....

SECTION E (to be completed by the Dean of the School of Postgraduate Studies on behalf of the PG Board)

1. Name:.....
2. Statement of Recommendation:.....
.....

Signature/Date:.....