



APPLICATION FOR DATA COLLECTION

Assignment

Project Paper/Thesis/Dissertation

Title of Project Paper/Thesis/Dissertation:

Programme:

Course Code:

Lecturer's/ Supervisor's Name:

Letter to:

TO WHOM IT MAY CONCERN

*Maximum 3 letters will be issued

Name of Students:

No	Matric No.	Mode of Study	Name	Phone No.

Applicant's Signature:

Date:

FOR OFFICE USE ONLY

Received Date:

Registered Date:

Approved

Rejected

Signature and Stamp:

Date:

* Tick wherever appropriate