UNIVERSITY OF BENIN BENIN CITY, NIGERIA



INTER-FACULTY TRANSFER: 2023/2024 ACADEMIC SESSION APPLICATION FORM

Affix Current Passport Photograph

NOTE: FULL-TIME INTER-FACULTY TRANSFER IS A PRIVILEGE, AND NOT A RIGHT. STUDENTS WHO HAVE PREVIOUSLY TRANSFERRED FROM ANOTHER FACULTY/SCHOOL ARE NOT ELIGIBLE FOR TRANSFERS.

TO BE COMPLETED BY STUDENT IN DUPLICATE AND TO EXAMS AND RECORDS DIVISION

SUBMITTED

SECTION A:

1.	Surname of Student MiddleNames: First Name:				
2.	Tel. Number:				
3.	Mode of Entry: UME (Indicate Scores) Direct Entry (Indicate Grades)				
4.	Subjects Credited at WASC O' Level : (Photocopies to be attached). Photocopies to be attached; (1) (6) (2) (7) (3) (8) (4) (9) (5)				
5.	Matriculation No.:				
6.	a) Present Faculty/School: b) Present Department and Programme (if applicable):				
7.	Present Level:				
8	Courses Taken Last Session: (Course code only) First Semester:				
	Second Semester:				

9.	Proposed Faculty/School:		
	Department and Programme of choice:		
10.	Reason(s) for Transfer: (a) Personal wish (Tick): / / (b) Advised to Withdraw from Faculty/S	chool (Tick): / /	
11.	(a) Have you previously transferred from any (b) If YES, State year of transfer	other Faculty/School or Department? YES/NO	2
	Date	Signature of Student	
SECTION	To be completed by the Faculty/School The Head of Department, Deans and 12. (a). State Courses taken in 100 Level with a Session		Academic
	First Semester Results	Second Semester Results	
	 		
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(b). Please attach courses taken in 200 Level with grades made. (Students Transferring to Faculty of Pharmacy)

13(a)	Enter Marks and other records for last Session: 2022/2023. (Please seek the assistance of the Faculty Examinations Officer)		
	First Semester Results	Second Semester Results	
(b)	Indicate whether or not the stude University:	ent was advised to withdraw from the Faculty/School or the	
	Checked by (Name)		
	Signature of Staff	Date	
14.	Comments on Academic Record	ls, Character and Discipline:	
15.	Pending Disciplinary Action, if ar	ny (give details):	
16.	Are you willing to release this stu (Yes/No):	udent?	
17			
V			
	resentative's Signature	Signature of HOD Date:	
	Signature of De		
	Date:		

TO BE COMPLETED BY EXAMS & RECORDS DIVISION

SECTION C:	Student's record for 2022/2023 Academic Division)	Session. (To be completed by Exams and Records
	Credits Passed:	
	Credits Failed:	
	Category/Summary of Results:	.65
	Dep	outy Registrar
SECTION D:	To be completed by the Proposed Faculty, of the Proposed Faculty/School (if applical	/School Representative in consultation with the Dean ble).
18.	Are you willing to accept this student? (Yes/No):	
19.	If YES, State: (a) Department: (b) Level: (c) Course:	
20.	Give reasons for accepting the student:	······································
21.	If NO, give reasons for not accepting the s	tudent:
Head of Department	or Faculty Representative's Signature (if applicable)	Signature of Dean
Date:		Date:
SECTION E:	Decision(s) taken by the Central Committee	:e:
 CI	nairman's Signature	Date