



**JOMO KENYATTA UNIVERSITY
OF
AGRICULTURE AND TECHNOLOGY
MOMBASA CBD CAMPUS**

STUDENT EXAM RESULTS STATUS FORM

PART A:**Student's Details****CONTACT**

(To be filled by a student whose registration number is missing in Provisional Results List)

Registration Number: Date:

Student's Full Official Names:

Course: Year of Study..... Semester.....

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PART B:**Results Status:**

(To be filled by Examinations Office)

Student's Examinations Results Status Summary:

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Details

UNIT CODE	UNIT TITLE	LECTURER	REMARKS

General Comments/Recommendations by Examinations Officer:

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Signature..... Date:

