



**UNIVERSITY OF ESWATINI – LUYENGO CAMPUS
REGISTRATION FORM – ACADEMIC WARNING STUDENT**



Declaration by Student: I understand that as a student with an academic warning, I am limited to register for 15.4 credits. I have checked my course structure and have selected courses that will add to a total of 15.4 credits.

NAME OF STUDENT: _____ **STUDENT ID:** _____

PROGRAMME OF STUDY: _____ **SEMESTER:** _____

CONTACT NUMBER: _____ **EMAIL:** _____

COURSES TO BE TAKEN:

COURSE CODE	COURSE FULL NAME

STUDENT'S SIGNATURE: _____

(FOR REGISTRY OFFICE USE ONLY)

ACTIONED BY: _____

SIGNATURE: _____ **DATE:** _____

UPON RECEIPT OF AN EMAIL INDICATING THAT YOUR REGISTRATION HAS BEEN COMPLETED, CHECK YOUR ENROLMENT DETAIL IN YOUR REGISTRATION PORTAL AND PRINT YOUR PROOF OF REGISTRATION.