

UNIVERSITY OF ESWATINI – LUYENGO CAMPUS REGISTRATION FORM – PROBATION STUDENT



Declaration by Student: I understand that as a student with a PROBATION, I am limited to register for A MAXIMUM of 12.4 credits. I have checked my course structure and have selected courses that will add to a total of12.4 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.**