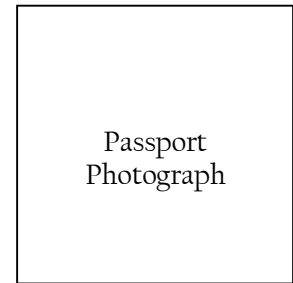




OSUN STATE COLLEGE OF EDUCATION, ILESA

SCHOOL OF

ADMISSION CLEARANCE FORM



From: School Officer,
School of

To: Coordinator MIS Unit
Directorate of Academic Planning

Please note that Candidate Mr./Mrs./Miss
Surname

.....
Other name(s)

whose photograph appears above has been screened and found qualified for admission into the:

Department:

Course Combination:

School:

.....
School Officer's Name and Signature with Official Stamp

.....
Date

Payment Clearance (to be done in Bursary Unit of the College)

This is to certify that the above named candidate has paid the Prescribed:

Acceptance Fee: Amount Receipt No: and

School Fee: Amount: Receipt No:..... and

can now be given matriculation number

Thank You

.....
Bursar's Name and Signature with Official Stamp

.....
Date