



MISSING MARK FORM

Reference F-7-29

Issue/Rev. 1/0

MISSING MARK FORM

FROM: EXAMINATION OFFICE

DATE _____

TO: DEAN OF FACULTY /HEAD OF DEPARTMENT

Student are advised [Tick as appropriate]

FACULTY OF ICT

FACULTY OF BUSINESS

DEPARTMENT OF EDUCATION, ARTS AND SOCIAL SCIENCES

DEPARTMENT OF ENGINEERING

DEPARTMENT OF HOSPITALITY AND TOURISM MANAGEMENT

DEPARTMENT OF JOURNALISM AND MEDIA STUDIES

A. Student Details (please write in CAPITAL LETTERS)

Student Reg.No

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Last Name _____

First Name _____ Telephone: _____

Address: _____ Postcode: _____

Student Email: _____ Signature _____

Unit code _____ Unit name/title _____

ADMINISTRATIVE ONLY

From our records pertaining to the semester: [e.g. Jan-April] _____ for the Academic years [e.g. 2013/2014] _____, the marks for the above mentioned student is:

Missing [the coursework or end of semester exam]

Erroneous [the coursework or end of semester exam]

Details of error results from: First attempt, Special Exam, Supplementary Exam [Specify] _____

Activity	Responsibility	Signature	
Prepared by:	Management Representative		1 22/06/2015
Approved by:	Vice Chancellor		22/06/2015

B. Findings from investigation (Tick):

- Course work not in the ERP
- Exam marks not in the course ERP
- Both course work and exam not in the ERP

Further Investigation Report [Tick]

- Special examination
- Supplementary examination
- No evidence of examination participation
- Course work done in different semesters
- No registration number of the exam script
- Others specify].....

Exam results/course work if any

COURSE WORK	<input type="text"/>
FINAL EXAM	<input type="text"/>
TOTAL	<input type="text"/>

Approved by: Examiner

Name _____ Signature _____ Date _____

Approved by: Faculty dean /head of department

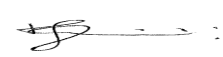

Name _____ Signature _____ Date _____

Approved by: Registrar Academics

Name _____ Signature _____ Date _____

Updated in the ERP by: Examination officer/Exam Secretary

Name _____ Signature _____ Date _____

Activity	Responsibility	Signature	
Prepared by:	Management Representative		22/06/2015
Approved by:	Vice Chancellor		22/06/2015