

FOUNTAIN UNIVERSITY, OSOGBO,

P.M.B. 4491, OSOGBO, OSUN STATE.

www.fuo.edu.ng. admission@fuo.edu.ng

INTER-UNIVERSITY TRANSFER FORM

to be completed in Quadruplicate

Passport

SEC	CTI	ON	A

1.	Name in Full
	(Surname in Capital Letters)
2.	Sponsor's Name
	Address
	Phone E-mail
3.	Applicant's qualifications
	(Photostat copies of Certificates e.g. SSCE, GCE, ND, IGMB, JUPEB, etc. should be attached)
4.	Present University:
5.	Faculty/College and Current Course of Study:
6.	Year of Admission into the Current University:
7.	Mode of Entry: U TM E Direct Entry
8.	JAMB Registration No: 9. JAMB Score:
10.	Diploma / A Level Grade
11.	Current CGPA:
12.	Course being applied for in Fountain University:
	1 st
	2 nd
	3 rd
13.	Reason (s) for seeking transfer
All	Applicants must request their former University to forward their academic transcripts directly to the Registrar.
Fo	untain University Osogbo, P.M.B. 4491, Osogbo.
••••	
SE	CTION B
14.	Head of Department (Current University) Comment
1	NameSignature/Date

rion (······································	•••••
FOR	OFFICIAL USE	
	CHECK LIST {tick as appropriate √ X}	
1	Evidence of payment for Inter-University Transfer form	
2	SSCE results or it equivalents	
3	'A' level, ND, NCE results for direct entry	
4	JAMB Admission Letter}	
5	Academic Transcript	
6	Undertaking Form	
	0 110 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	Oral interview report	
locum	Oral interview report ents listed above are sighted and attached to the appl	
locumo ECTIO 5. HOD	Oral interview report ents listed above are sighted and attached to the appl	ication form
ECTIO S. HOD Rema	Oral interview report ents listed above are sighted and attached to the apple N D (Receiving) Department rks	ication form
ECTIO S. HOD Rema	Oral interview report ents listed above are sighted and attached to the appl N D (Receiving) Department rks.	ication form
ECTIO ECTIO 6. HOD Rema Name	Oral interview report ents listed above are sighted and attached to the apple N D (Receiving) Department rks	ication form
ECTIO ECTIO 6. HOD Rema Name	Oral interview report ents listed above are sighted and attached to the apple N D (Receiving) Department rks	ication form
ECTIO Rema Name 7. Dean Name 8. Vice-	Oral interview report ents listed above are sighted and attached to the apple N D (Receiving) Department rks	eate