TD(IT):FSK29



SUBMISSION OF RESEARCH PROJECT FOR EXAMINATION

(FOR ACADEMIC SESSION 2017/2018 AND ONWARDS)

Student's Name :	
Semester/Session :	
Matric Number :	
Field of Research :	
Project Title :	
Supervisor :	
Please tick ($\sqrt{}$) the appropriate box.	
PROGRAMME: □ MDS □ MLIS □ MITM	
COURSE CODE: ☐ WQD7002 ☐ WQB7002 ☐ WQC7002	
SUBMISSION: 1. THREE (3) PRINTED COPIES BOUND IN SOFT COVER (NAVY BLUE): 2. ONE (1) SOFTCOPY (CD) - PDF: 3. TURNITIN REPORT < 20%:	
SIGNATURE: DATE:	
VERYFIED BY:	
Supervisor's (1) Signature Supervisor's (2) Signature	
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Staff's Signature & Name: Date:	
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