UNIVERSITY OF KWAZULU-NATAL

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EXAMINATION ATTENDANCE SHEET

MODULE CODE: .... MODULE TITLE: .... PAPER NO: ....

DATE: .... TIME: .... CAMPUS: .... PAGE: 1

	LASTNAME, FIRST NAME(S)	STUDENT NO	DEGREE	SEAT NO	SIGNATURE
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NO OF SIGNATURES

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INVIGILATOR (PRINT NAME)   SIGNATURE

STAFF COLLECTING SCRIPTS: ....
                          (PRINT NAME)   SIGNATURE

NO OF SCRIPTS COLLECTED: ....   DATE: ....   TIME: ....