



UNIVERSITY OF MAIDUGURI
OFFICE OF THE REGISTRAR
Examinations and Records Unit

TRANSCRIPT REQUEST FORM

1. ATTACH PHOTOCOPY OF YOUR STATEMENT OF RESULT OR CERTIFICATE [REDACTED]
2. SURNAME (while in School) [REDACTED] OTHER NAMES [REDACTED]
3. IDENTIFICATION NUMBER [REDACTED]
4. MODE OF ENTRY (UME, DIRECT ENTRY, TRANSFER, ETC)..... UME
5. PRESENT LEVEL (for those still in school).....
6. FACULTY..... MANAGE MENT SERVICE
7. DEPARTMENT..... [REDACTED]
8. DEGREE/DIPLOMA..... [REDACTED]
9. CLASS OF DEGREE/DIPLOMA..... SECOND
10. DATE AND YEAR OF GRADUATION AS ON THE STATEMENT OF RESULT OR CERTIFICATE [REDACTED]
11. GSM NUMBER(S)..... [REDACTED]
12. ADDRESS(ES) OF INSTITUTION(S) TO WHICH TRANSCRIPT SHOULD BE SENT.....
admissions@newford.org
Newford University, 1140 3rd ST. NE SUITE
200, WASHINGTON, DC, 20002, U.S.A.

MODE OF POSTING (A) SURFACE MAIL..... (B) COURIER.....
 IF BY COURIER SERVICE PLEASE MAKE SURE YOU WILL BEAR THE COST.

I ENCLOSE HEREWITH UNMAID PAYMENT RECEIPT No: [REDACTED] CHARGES
 FOR..... (1) ONE COPY(IES) OF TRANSCRIPT.

I AM AWARE THAT TRANSCRIPTS ARE NOT ISSUED TO INDIVIDUALS, BUT ARE SENT TO INSTITUTIONS.
 SIGNATURE..... [REDACTED] DATE..... 9th FEB, 2024

PLEASE RETURN THE COMPLETED FORM TO THE DEPUTY REGISTRAR (Examinations & Records)
 UNIVERSITY OF MAIDUGURI.

UNIVERSITY OF MAIDUGURI - 1000127

Payment Receipt

Generated On 09/02/2024

Remita Retrieval Reference (RRR)

PAYER INFORMATION

NAME

EMAIL

PHONE NUMBER

PAYMENT DETAILS

PAYMENT DATE	PAYMENT REF	SERVICE DESCRIPTION	AMOUNT (NGN)	CHARGES (NGN)	VAT ON CHARGES (NGN)	TOTAL (NGN)
			20,000.00	150.00	11.25	20,161.25
		TOTAL PAID	20,000.00	150.00	11.25	20,161.25
		TOTAL AMOUNT				20,161.25
		BALANCE DUE				0.00

BILLER REQUIRED INFORMATION

ITEM

DESCRIPTION

Description

Transcript Payment

Gifmis Code - (If Unknown Contact Mda)

1234

PAYMENT CHANNEL INFORMATION

You can contact Remita Support at support@remita.net or on +234 1 280 5182, 0803 555 5051

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