



THE UNIVERSITY OF THE WEST INDIES  
MONA CAMPUS

**On-line Data Entry of Examination Results  
2007/2008 academic year  
Verification Form**

**Department/Section/Unit:** -----

Course Code	Name of User	I.D. No. of User

**Head of Department/Section/Unit:** -----  
(Write out name in full)

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**Signature**

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**Date**