COVENANT UNIVERSITY

STUDENTS’ LAPTOP REGISTRATION FORM

1. NAME

2. MATRICULATION NO

3. COLLEGE /DEPARTMENT

4. PROGRAMME

5. HALL OF RESIDENCE

6. LAPTOP TYPE

7. SERIAL NO

8. COLOUR

9. ANY OTHER IDENTIFICATION MARK

Attestation:

I attest to the information provided above as being true.

Student’s signature

Date
COVENANT UNIVERSITY

STUDENTS’ PARENT/GUARDIAN’S INFORMATION

1. SURNAME------------------------------------------------------------------------------------------------------------------
2. FIRST NAME-----------------------------------------------------------------------------------------------------------------
3. MIDDLE NAME----------------------------------------------------------------------------------------------------------------- 
4. HOME ADDRESS---------------------------------------------------------------------------------------------------------------------
5. OFFICE ADDRESS---------------------------------------------------------------------------------------------------------------------
6. TELEPHONE NUMBERS:
   HOME----------------------------------------------------------------------------------------------------------------------------
   MOBILE----------------------------------------------------------------------------------------------------------------------------
   OFFICE----------------------------------------------------------------------------------------------------------------------------
7. E-MAIL ADDRESS----------------------------------------------------------------------------------------------------------------------

Attestation:

I----------------------------------------------------------------------------------------------------------------------------, Parent/Guardian to
(Surname first)----------------------------------------------------------------------------------------------------------------------attest to the
Information provided above as being true.

Parent/Guardian’s Signature --------------------------------- Student’s signature---------------------------------
Date --------------------------------------------------------- Date----------------------------------------------------------
STUDENTS’ AFFAIRS DEPARTMENT
VISITORS’ ACCREDITATION FORM

A. STUDENT DATA:

NAME OF STUDENT: ____________________________________________________________
(SURNAME FIRST)
COLLEGE/DEPARTMENT: ___________________________________________________________
PROGRAMME: _________________________________________________________________
LEVEL: _____________________________
HALL OF RESIDENCE: ___________________________________________________________
ROOM NO: _________________________________________________________________

B. ACCREDITED VISITORS

DATA OF PARENTS

(1) NAME: ________________________________________________________________

ADDRESS: ________________________________________________________________

____________________________________________________________

TELEPHONE: ______________________________________________________________

(2) NAME: ________________________________________________________________

ADDRESS: ________________________________________________________________

____________________________________________________________

TELEPHONE: ______________________________________________________________
(3) NAME: -------------------------------------------------------------

ADDRESS: -------------------------------------------------------------

TELEPHONE-------------------------------------------------------------

(4) NAME: -------------------------------------------------------------

ADDRESS: -------------------------------------------------------------

TELEPHONE-------------------------------------------------------------

PARENT/GUARDIAN’S SIGNATURE & DATE-----------------------------------
COVENANT UNIVERSITY

USE OF PHONE PROHIBITION/UNDERTAKING

I, ________________________________, a student of Covenant University, affirm my allegiance to abide by the University’s Regulation on the use of any communication gadget both within and outside the Halls of Residence.

I undertake not to use or be in possession of any mobile phone, land phone or any other communication devices as stipulated in the University Rules and Regulations. If I am found with any of such things within the Campus contrary to this undertaking of mine, I should be visited with the maximum penalty as stipulated in the Rules and Regulations of Covenant University.

NAME: ________________________________

COLLEGE: ________________________________

DEPARTMENT: ________________________________

SIGNATURE: ________________________________

DATE: ________________________________

WITNESS (PARENT)

NAME: ________________________________

SIGNATURE: ________________________________

DATE: ________________________________
COVENANT UNIVERSITY’S HALL OF RESIDENCE

REQUIREMENTS for UNDRGRADUTES

Below is a list the minimum required item that a student may need during their stay in the Hall of Residence. These items are highly recommended to ensure a comfortable and stress-free stay in the Halls of Residence.

Please note that storage space for each student is limited. Students must endeavour to bring only the items of necessity to avoid congestion in the room.

1. Pillow 1
2. Pillow case 1
3. Blanket 1
4. White Bed Sheet 4’ X 7’ 2
5. Mosquito Net 1
6. Set of Cutlery 1
7. Plastic/Metal Buckets 2
8. Padlock and Key Ring 1
9. Torch Light & Batteries 1
10. Hangers 1 Dozen
11. School Bag 1
12. Rain Coat or Umbrella 1
13. Toiletries 1
14. Reading Lamp W/40 watts bulb or Fluorescent tube 1
15. Laptop/ Desktop PC 1
16. Feeding per month N18,000
**COVENANT UNIVERSITY**  
**LIST OF PROHIBITED ITEMS IN THE HALLS OF RESIDENCE**

<table>
<thead>
<tr>
<th>S/N</th>
<th>ITEMS</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Alcohol Materials</td>
</tr>
<tr>
<td>2</td>
<td>Blenders</td>
</tr>
<tr>
<td>3</td>
<td>Binoculars</td>
</tr>
<tr>
<td>4</td>
<td>Candles</td>
</tr>
<tr>
<td>5</td>
<td>Cigarettes</td>
</tr>
<tr>
<td>6</td>
<td>Contraband Wears/Items (jeans, Spaghetti Wears, Tissue Skirts, Etc)</td>
</tr>
<tr>
<td>7</td>
<td>Cooking Pots and Saucepans</td>
</tr>
<tr>
<td>8</td>
<td>Electric Blankets, Mattresses or Bed</td>
</tr>
<tr>
<td>9</td>
<td>Electric Boiling Ring</td>
</tr>
<tr>
<td>10</td>
<td>Electric Kerosene or Gas stove</td>
</tr>
<tr>
<td>11</td>
<td>Grillers</td>
</tr>
<tr>
<td>12</td>
<td>GSM Cell Phones and Land Lines</td>
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<tr>
<td>13</td>
<td>Hair Dryers</td>
</tr>
<tr>
<td>14</td>
<td>Hot Plates</td>
</tr>
<tr>
<td>15</td>
<td>Illicit Drugs (Heroin, Cocaine, weeds, Etc)</td>
</tr>
<tr>
<td>16</td>
<td>Kerosene Lamps</td>
</tr>
<tr>
<td>17</td>
<td>Lethal Weapons/Injections Syringes</td>
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<tr>
<td>18</td>
<td>Matches/Gas Lighters</td>
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<tr>
<td>19</td>
<td>Micro Wave Ovens</td>
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<tr>
<td>20</td>
<td>Photo-coping Machines</td>
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<tr>
<td>21</td>
<td>Raw Food Items</td>
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<tr>
<td>22</td>
<td>Refrigerators</td>
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<tr>
<td>23</td>
<td>Rice Cookers</td>
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<tr>
<td>24</td>
<td>Toasters</td>
</tr>
<tr>
<td>25</td>
<td>TV Sets</td>
</tr>
<tr>
<td>26</td>
<td>Ungodly Musical Tapes &amp; CDs</td>
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<tr>
<td>27</td>
<td>Video Machines, Video Tape &amp; VCD Players</td>
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<tr>
<td>28</td>
<td>T.V. Card/TV Antennas</td>
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<tr>
<td>29</td>
<td>DVD Players</td>
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<tr>
<td>30</td>
<td>SIM CARD</td>
</tr>
<tr>
<td>31</td>
<td>Cooking Utensils</td>
</tr>
<tr>
<td>32</td>
<td>Any Item Intended For Sale</td>
</tr>
<tr>
<td>33</td>
<td>Other Items Requiring Registration Before Use</td>
</tr>
<tr>
<td>34</td>
<td>Computer Game (Play Stations, Etc)</td>
</tr>
<tr>
<td>35</td>
<td>Any other Contraband Items that may be specified from time to time</td>
</tr>
</tbody>
</table>