



**UNIVERSITY OF AGRICULTURE, ABEOKUTA  
EXAMINATIONS AND RECORDS UNIT**

***ATTESTATION LETTER APPLICATION FORM***

**To:** Head of Unit (Examinations and Records) **Date:** .....

**Full Name:** .....  
(Surname first)

**Matric. No.:** ..... **Dept.:** .....

**Diploma/SLT/Degree:** (Please indicate) .....

**Candidate's Contact Address:** .....

**Destination(s) of Attestation Letter:** (If applicable)

1.....  
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2.....  
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**E-mail address:** .....

**Telephone Number**..... **Signature & Date:**.....