***DEPARTMENT OF EPIDEMIOLOGY AND DISEASE CONTROL***

Affix

Passport

**KOGI STATE COLLEGE OF HEALTH SCIENCES AND TECHNOLOGY,**

**PMB 1047, IDAH, NIGERIA.**

**COURSE REGISTRATION FORM**

**STUDENT’S NAME…………………………………………………….REG. NO: *SEH/EDC/21/ND/………………….***

**PHONE NO: …………………………………..………………………… LEVEL: ND 11 SEMESTER: 1**

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| --- | --- | --- | --- | --- |
| **S/NO** | **COURSE TITLE** | **COURSE CODE** | **C.U** | **LECTURER****SIGNATURE**  |
| **1** | **COMMUNICABLE DISEASE II**  | **EDC 123** | **2** |  |
| **2** |  **INTRODUCTION TO HUMAN NUTRITION** | **EDC 211** | **3** |  |
| **3** |  **PUBLIC HEALTH ADMINISTRATION**  | **EDC212** | **2** |  |
| **4** |  **MEDICAL SOCIOLOGY**  | **EDC 213** | **2** |  |
| **5** |  **HEALTH EDUCATION AND PROMOTION**  | **EDC 214** | **3** |  |
| **6** |  **MATERNAL AND CHILD HEALTH** | **EDC 215** | **3** |  |
| **7** |  **INTRODUCTION TO PHARMACOLOGY** | **EDC 216** | **2** |  |
| **8** |  **GENERAL LABORATORY TECHNIQUES**  | **GLT 111** | **2** |  |
| **9** |  **DISEASE SURVEILLANCE**  | **EHT 217** | **3** |  |
| **10** |  **PRACTICE OF ENTERPRENEURSHIP**  | **EED 216** | **2** |  |
| **11** |  **RESEARCH METHODOLOGY**  | **GNS 228** | **2** |  |
| **12** | **PATHOLOGY** | **EDC 219** | **1** |  |
| **13** | **OCCUPATIONAL HEALTH & SAFETY** | **EDC 218** | **1** |  |
| **14** | **CLINICAL WASTE MANAGEMENT**  | **EHT 218** | **1** |  |
|  |  | **TCU** | **28** |  |

**STUDENT’S SIGNATURE………………………………………….. DATE…………………………..**

**PRACTICAL OFFICE REMARK ………………………. SIGNATURE/DATE: ..………………..**

**DEPT. EXAM OFFICE REMARK……………………SIGNATURE/DATE: ……………………..**

**DESK OFFICER (FINANCE): …………………………… SIGNATURE/DATE: ………………….**

**DEPT. HOD……………………………… SIGNATURE/DATE: ………………………………………**