



Divine Word University

P.O. Box 483, Madang, Madang Province, Papua New Guinea

Tel: (675) 422 2937 Fax: (675) 422 2812

REGISTRATION

PRO-FORMA REGISTRATION RECEIPT

Student Name: _____ **ID#:** _____ **Program/Year:** _____

Residential:	Standard Fees	On Registration	Non-Residential:	Standard Fees	On Registration
Year 1 & 2 Program	() K5915.00	K3215.00	Diploma Program	() K4796.00	K2096
Degree Program	() K7590.00	K4890.00	Degree Program	() 5634.00	K2934.00

FINANCE REGISTRATION: Late Registration () Receipt No: _____ K _____

() **Residents:** Residence with Key / Meals / ID Card / Email Address / Lectures / Library Privileges

() **Non-Residents:** ID card / Email Address / Lectures / Library Privileges

Date: ____ / ____ / ____ **O/S or O/V Amount:** K _____ - _____

Date: ____ / ____ / ____ **On Registration Amount:** K _____ - _____

Calculation: () **S/S – Self Sponsor** () **HECAS/AES – TESAS**

Registration Fees	_____ - _____	Fees	_____ - _____
Previous OS/OV	_____ - _____	On Registration	_____ - _____
Payments	_____ - _____	Payments	_____ - _____
Amount Due K	_____ - _____	Amount Due	_____ - _____

Notes:

Mr. Gerald Tommy
Student Finance Officer
Enquiries: gtommy@dwu.ac.pg

REGISTERED

Registration Officer
Student Administration Office
(When Forms are received)

Mrs. Cecilia N'Drower
DWU Registrar
Enquiries: cndrower@dwu.ac.pg