

School of Campus:.....

APPLICATION FOR CHANGE OF CURRICULUM

Surname:..... First Names:.....

Student No:..... Telephone No:.....

Qualification:..... Programme:..... Year of study:..... Semester.....

WITHDRAWAL from modules:

Module code	Sem	Module name	Credit Points	Module rep's Signature

Please refer to the University fee booklet for appropriate refunds for cancellations.

REGISTRATION for modules

Module code	Sem	Module name	Credit Points	Module rep's Signature

Date: Signature of applicant:

[For official use only] Comments by Programme Leader:

.....

Date:Signature

Approved by Dean & Head of School or Designate:

Date: Signature:.....

For Office use only:

Any further comments by Dean & Head of School or Designate (*For Tracking Purposes*)

Date	Comment	Signature

Final Approval by Dean and Head of School or Designate:

Date: *Signature:*.....

Name of data capturer	Date	Signature