



### CHANGE PROGRAMME / COURSES

STUDENT NUMBER:	<input type="text"/>	QUALIFICATION REGISTERED FOR:	<input type="text"/>
JURNAME AND INITIAL(S):	<input type="text"/>		
POSTAL ADDRESS:	<input type="text"/>	TELEPHONE NUMBER:	<input type="text"/>

#### CHANGE OF STUDY PROGRAMME

**DEADLINE: 29 FEBRUARY 2016 – KINDLY NOTE THAT CHANGE OF PROGRAMME IS SUBJECT TO AVAILABLE SPACES ON THE PROGRAMME.**

Name of PROGRAMME registered for currently:	<input type="text"/>	PROGRAMME CODE:	<input type="text"/>	MODE:	<input type="text"/>
Name of PROGRAMME changing to:	<input type="text"/>	PROGRAMME CODE:	<input type="text"/>	MODE:	<input type="text"/>

#### CHANGING MODE OF STUDIES

**DEADLINE: 29 February 2016**

This form makes provision for changing of courses from distance to **full- and part-time**, from full-time to part-time only and vice versa depending on the availability of spaces in classes.

Changing a mode of studies of a course from full- or part-time **to distance** is done by the Centre of Open and Lifelong Learning (COLL) only. Success in changing the mode of studies will depend on the availability of Study Material. Forms are available at COLL.

COURSE (SUBJECT) NAME	CODE	MODE OF STUDIES		LECTURER	
		FROM	TO	NAME & SURNAME	SIGNATURE

STUDENT'S SIGNATURE: ..... DATE: .....

*For office use only:*

Comments from FO (if any)	Type of Discontinuation	Faculty Officer Signature	Date

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