Course Change Request Form

STUDENT DETAILS			
First Name:			
Last Name:			
Date of Birth:		**Student ID**	

Course(s) that you are currently enrolled and want to withdraw	
Course 1	
Course 2	
Course 3	
Course 4	

Course(s) that you want to enrol	
Course 1	
Course 2	
Course 3	
Course 4	

Proposed Start Date of the 1st Course that you want to enrol: _____

Reason for Change

Student Signature: _____   **Date: _____**

Office Use Only			
Remarks			
Is the change Approved?	Yes / No	**Approved Staff Name**	
Is the new offer created?	Yes / No / NA	**Is the new Acceptance signed?**	Yes / No / NA
Is the changes updated on SMS?	Yes / No / NA		
Is the changes updated in PRISMS?	Yes / No / NA	**Is the outcome communicated to the student?**	Yes / No
Processing staff		**Signature**		**Date**	