



REQUEST TO WITHDRAW/ADD COURSE

Student ID number:

PERSONAL DETAILS

Last Name: First Name: Middle Name: Date of Birth:

Postal Address:

Telephone:
Fax:
Email:

Programme: Major 1: Major 2: Minor:

Are you sponsored? Yes No

If yes, the name of sponsor: _____

(Attach a written and signed approval from your sponsor for the request to withdraw/add courses)

REQUEST DETAILS

I wish to withdraw from the following course(s):

Reasons for withdrawal:

I wish to add the following course(s):

Reasons for adding:

I accept that I am liable for any outstanding fee associated with my withdrawal from the course(s) listed above and take full responsibility for the payment in full for all outstanding fees.

Student's Signature _____ Date: _____

FOR OFFICIAL USE

Approval Granted: Yes No

Course(s) Withdrawn	Course(s) Added

Is approval from the sponsor attached? Yes No

Comments _____

Head of Department: Signature: _____ Date: _____

Dean of School: Signature: _____ Date: _____

Is refund of fees approved: Yes No

Registrar: Signature: _____ Date: _____

Computer Update Initial: _____ Date: _____

Verified: _____ Date: _____