



PROGRAM CHANGE FORM

STUDENT INSTRUCTION:

- Student has to fill up the form within 2 weeks after the beginning of a term.
- This form is to be submitted to the Academic Office.

STUDENT'S NAME: _____ NRIC / Passport No. : _____

MATRIC No. _____ CONTACT No. : _____

INTAKE: _____ SPONSOR : _____

CURRENT PROGRAMME (before change)	PROPOSED PROGRAM (after change)
PROGRAMME:	PROGRAMME:

Current Academic Standing: Good/Probation 1/Probation2 CGPA: _____

Reason for Change: _____

I hereby request the above change of programme. I understand I will be subject to all requirements and enrollment restrictions of the school and department of my proposed new program, that my graduation may be delayed as a result of changing to a new programme. I am also aware that there are credit hours that cannot be used toward my chosen new programme.

Student's signature: _____ Date: _____

OFFICE USE ONLY**Remarks by International Students Office (for international students only):**

Application is Recommended / Not Recommended

Comments : _____

Date : _____ Signature & Stamp : _____

TO BE COMPLETED BY ACCEPTING NEW PROGRAMME	TO BE COMPLETED BY RELEASING OLD PROGRAMME
Recommended / Not Recommended:	Recommended / Not Recommended:
Remark:	Remark:
Signature of Head of School:	Signature of Head of School:
Date:	Date:

Vice President Academic Use	Learning Management Section Use
Approved/ Not Approved:	Date Recorded:
Term to Start: _____	
Remark:	
Signature of Vice President Academic:	Date Informed Student :
Date:	