

SCHOOL OF COMPUTING**Module Change and Specialist Track Change**

This form may take you about 5 minutes to fill in.

The data provided by the student will be kept strictly confidential and be used for the purpose of module change or specialist track change.

Student Name: _____

Adm No: _____

Student Class: _____

Contact No: _____

Instructions:

1. This form should be used for requesting changes to core/elective modules or change of specialist track (DIT-SA).
2. State clearly your reasons for your request.
3. Confirm your choice by signing at the given space.
4. Submit the duly completed form to the **respective Course Administrator (CA)**.
5. All requests for changes are subject to the school's approval.

MODULE CHANGE REQUEST

S/No	Module Code	Module Name	State Request (Select from dropdown box below)	Module Class	Reasons to change
1				Given Module Class	
				Assigned Module Class*	
2				Given Module Class	
				Assigned Module Class*	

*Assigned Module Class - to be filled by Course Administrator

SPECIALIST TRACK CHANGE REQUEST (for DIT-SA only)

Assigned Track:	Requested Track:
Reasons for your request (max 500 characters)	

Student Signature: _____

Date: _____

FOR OFFICIAL USE

No. of Students: _____ (present class/specialist track)

No. of Students: _____ (proposed class/specialist track)

Request is:

Approver's Name: _____

Approver's Signature: _____ Date: _____

Implemented By: _____ Date: _____