## Course Change Request Form

| CBM                                   |
|---------------------------------------|
| THE COLLEGE OF<br>BUSINESS MANAGEMENT |
|                                       |
|                                       |

| STUDENT DETAILS  |               |   |    |      | Ť             |  |
|--|---------------|---|----|------|---------------|--|
| 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 enro                                |               |   |    |      |               |  |
| 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:   |               |   | Da | te:  |               |  |
| Office Hee Only  |               |   |    |      |               |  |
| Office Use Only Remarks  |               |   |    |      |               |  |
|  |               | T   | Γ  |      |               |  |
| 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           |    |      | 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 |    |      | Yes / No      |  |
| Processing staff   |               | Signature   |    | Date |               |  |