



Application for Course Change

Section A: Personal Details

Student ID:

Student Name:

Email:

Contact Number:

Course:

Course Start Date:

Course End Date:

Section B: Request Details

Proposed New Course:

Course Start Date:

Reason for Transfer:

Student Signature:

Date:

Section C: Approval *(to be completed by Course Coordinator / Admin Officer)*

Satisfactory Course Progress: ☐ Yes ☐ No

Request Approved: ☐ Yes ☐ No

Course Coordinator/Designated Officer Name:

Signature:

Date:

Section D: Credit Transfer Details *(to be completed by new Course Coordinator/Admin Officer if applicable)*

Credit Transfer Granted: ☐ Yes ☐ No

Comment(s):

Subject(s) *(Please indicate the subject name, unit code and unit name that was granted credit transfer):*

New Course Start Date:

New Course End Date:

Approved by Course Coordinator/Designated Officer (New Course):

Signature:

Date:



Section E: Office Use Only

Has the student been informed of any difference in fees? ☐ Yes ☐ No

Change of Course Fee Difference:

Admin fee Paid? ☐ Yes ☐ No

Tuition Fees Paid? ☐ Yes ☐ No

New eCoE generated? ☐ Yes ☐ No

Registered into the system? ☐ Yes ☐ No

Student informed ☐ Yes ☐ No

Student Services Officer:

Signature:

Date: