**UNIVERSITY OF NAMIBIA**

**CENTRE FOR OPEN, DISTANCE AND E-LEARNING**

**APPLICATION FOR CHANGE OF OFFERING TYPE**

**STUDENT NUMBER: ....................................................................................... ACADEMIC YEAR .....................................**

**SURNAMEAND INITIALS:**

**.....................................................................................................................................................................................................**

**COURSE OF STUDY: .................................................................. CODE: ...........................................................**

**EMAIL ADDRESS:............................................................ TELEPHONE NR:……………………………………………….….**

**THIS FORM MUST BE COMPLETED IN FULL! PLEASE NOTE THAT NO LATE SUBMISSIONS FOR CHANGES OF OFFERING TYPES WILL BE ACCEPTED. DEADLINES FOR CHANGES ARE ANNUALLY ADVERTISED IN THE GENERAL INFORMATION AND REGULATIONS PROSPECTUS.**

**1. ENTIRE QUALIFICATION TO BE CHANGED:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **FULL NAME OF****QUALIFICATION** | **QUALIFICATION CODE** | **STUDY PERIOD****(e.g. year 1)** | **CURRENT REGISTERED** **OFFERING TYPE****(e.g. Swakopmund)** | **OFFERING TYPE TO****BE CHANGED TO:****(e.g. Gobabis)** |
|  |  |  |  |  |

**2. MODULE(S) TO BE CHANGED:**

|  |  |  |  |
| --- | --- | --- | --- |
| **FULL NAME OF MODULE** | **MODULE CODE** | **CURRENT REGISTERED** **OFFERING TYPE****(e.g. Swakopmund)** | **OFFERING TYPE TO BE CHANGED TO:****(e.g. Gobabis)** |
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**SIGNATURE OF STUDENT: ...................................................................... DATE: ............................................**

**REMARKS:......................................................................................................................................................................**

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| **OFFICIAL:****APPROVED/ NOT APPROVED: ……………………… ..……………………. ………….……….** **NAME SIGNATURE DATE****REMARKS:……………………………………………………………………………………………………………****………………………………………………………………………………………………………………………….****PROCESSED: …………………………………….………. …………………….. ………………** **NAME SIGNATURE DATE** |