



UNIVERSITY OF ESWATINI

CHANGE OF SUBJECTS/COURSES ON REGISTRATION FORM (SEMESTER 2, 2022/2023)

(To be completed in triplicate, copies for Student, Academic Office and Faculty/Institute)

NAME OF STUDENT: \_\_\_\_\_ STUDENT NO: \_\_\_\_\_

PROGRAMME OF STUDY: \_\_\_\_\_ SEMESTER: \_\_\_\_\_

CONTACT NUMBER: \_\_\_\_\_

**COURSES TO BE TAKEN**

<u>COURSE CODE</u>	<u>COURSE FULL NAME</u>
1. _____	_____
2. _____	_____
3. _____	_____

**COURSES TO BE DROPPED**

<u>COURSE CODE</u>	<u>COURSE FULL NAME</u>
1. _____	_____
2. _____	_____
3. _____	_____

STUDENT'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

TUTOR/COORDINATOR'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

DEAN/DIRECTOR'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**FINANCIAL RELIEF CLAUSE: Please note that only a course(s) dropped within the first two weeks (calendar weeks) after the commencement of lectures (not later than 10/11/2023) in a semester will be eligible for a refund. A student who drops a course(s) after the two weeks (calendar weeks) of the commencement of lectures shall be liable for all fees in relation to that course(s).**

**(FOR ACADEMIC OFFICE USE ONLY)**

DATE RECEIVED: \_\_\_\_\_ CHECKED BY: \_\_\_\_\_

CANCELLATION CODE: \_\_\_\_\_ REGISTRAR'S SIGNATURE: \_\_\_\_\_

**(FOR FACULTY USE ONLY)**

ACTIONED BY: \_\_\_\_\_

FACULTY ADMINISTRATOR'S SIGNATURE: \_\_\_\_\_ DATE ACTIONED: \_\_\_\_\_