



# CHANGE OF COURSE (MODULE) FORM

UNIVERSITY OF LEEDS

For use **only** where no change of programme is involved

**STUDENT** PLEASE COMPLETE **SECTION 1** AND OBTAIN APPROVAL OF THE SCHOOLS OFFERING AND RELEASING YOU FROM ALL MODULES LISTED. YOU MAY BE CHARGED A LATE FEE, IF THE FORM IS RETURNED AFTER THE PUBLISHED DEADLINES.

**1** Student ID Number:

Last Name: \_\_\_\_\_

Forenames: \_\_\_\_\_

Degree (e.g. BSc, BA) \_\_\_\_\_

Programme of Study: \_\_\_\_\_ Year of Programme 1 2 3 4

**SCHOOL OFFERING NEW COURSE(S)** If you agree to this request please initial the form. Keep a copy for your records and pass the form to the Releasing School.

## 2 NEW COURSES TO BE TAKEN (For Part of Term: 1 – Semester 1; 2 – Semester 2; 3 – Semester 1 & 2)

CRN	SUBJECT & COURSE CODE	COURSE TITLE	CREDITS	PART OF TERM	AUTHORISED BY (INITIALS)
<input type="text"/>	<input type="text"/>	_____	_____	_____	_____
<input type="text"/>	<input type="text"/>	_____	_____	_____	_____
<input type="text"/>	<input type="text"/>	_____	_____	_____	_____
<input type="text"/>	<input type="text"/>	_____	_____	_____	_____
<input type="text"/>	<input type="text"/>	_____	_____	_____	_____

**RELEASING SCHOOL** If you agree to this request please initial the form. Keep a copy for your records and pass the form to the Parent School.

## 3 COURSES TO BE DISCONTINUED (For Part of Term: 1 – Semester 1; 2 – Semester 2; 3 – Semester 1 & 2)

CRN	SUBJECT & COURSE CODE	COURSE TITLE	CREDITS	PART OF TERM	AUTHORISED BY (INITIALS)
<input type="text"/>	<input type="text"/>	_____	_____	_____	_____
<input type="text"/>	<input type="text"/>	_____	_____	_____	_____
<input type="text"/>	<input type="text"/>	_____	_____	_____	_____
<input type="text"/>	<input type="text"/>	_____	_____	_____	_____
<input type="text"/>	<input type="text"/>	_____	_____	_____	_____

**PARENT SCHOOL** If you agree to this request please sign the form and update the student record. Keep a copy for your records and send this form to the relevant Progress Clerk, Examinations Section, Taught Student Administration.

## 4 APPROVAL OF PARENT SCHOOL

APPROVAL SIGNATURE

SCHOOL

DATE