



COURSE TRANSFER FORM

This form must be completed by the student requesting to transfer course and returned to the Student Hub where the NEW course is administered
COURSE TRANSFERS ARE NOT NORMALLY PERMITTED BEYOND WEEK 2

SECTION A:

SURNAME	FORENAME	STUDENT ID NUMBER

CURRENT COURSE TITLE	CURRENT LEVEL	CURRENT ACADEMIC YEAR

SECTION B:

NEW COURSE TITLE	NEW LEVEL	ACADEMIC TRANSFER YEAR	STUDENT HUB LOCATION	MODE OF STUDY

MODULE REGISTRATION FORM FOR NEW COURSE

Please note any modules currently registered for this period that is not listed below will be deleted

PERIOD	MODULE CODE	MODULE TITLE	CREDIT VALUE

SECTION C:

SIGNED (STUDENT)	PRINT NAME	DATE

Confirmation of approval by Course Leader of course into which student is transferring onto and confirmation that the modules listed in Section B are correct:

SIGNED APPROVAL	PRINT NAME	DATE

For HUB Staff:

NEW Route Code _____

NEW Course Code _____

Modules entered on SITS Y / N

Name _____ Date _____

For HUB Staff: Date Received

For OPS Staff: Date Received

Name _____ Date _____

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