

**UNIVERSITY OF EASTERN AFRICA, BARATON  
CHARTERED LEGAL NOTICE No. 111, 1991**

**CHANGE OF PROGRAMME REQUEST FORM**

(Please Print Clearly)

LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_

Student Id Number. \_\_\_\_\_ Date of Admission \_\_\_\_\_ Year of Graduation \_\_\_\_\_

I WOULD LIKE TO CHANGE MY PROGRAMME FROM \_\_\_\_\_

TO \_\_\_\_\_

REASON \_\_\_\_\_

MY SPONSOR(S) HAS/HAVE AGREED. MY SPONSOR'S LETTER OF AGREEMENT IS ATTACHED TO THIS FORM.

YES \_\_\_\_\_ NO. \_\_\_\_\_

THE CHAIRPERSON OF MY NEW DEPARTMENT HAS CONSENTED TO THE CHANGE INTO THE PROGRAMME

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**DECLARATION OF THE CHAIRPERSON OF THE DEPARTMENT OFFERING THE NEW PROGRAMME REQUESTED**

I HAVE APPROVED THE CHANGE OF PROGRAMME AS REQUESTED IN THE FORM

NAME OF CHAIRPERSON \_\_\_\_\_ SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

DEAN OF SCHOOL (New School) \_\_\_\_\_

NAME SIGNATURE DATE

CHAIRPERSON (Current Department) \_\_\_\_\_

NAME SIGNATURE DATE

DEAN OF SCHOOL (Current School) \_\_\_\_\_

NAME SIGNATURE DATE

**FOR OFFICIAL USE ONLY**

ACTION TAKEN \_\_\_\_\_

BY \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**NOTE:** No action will be taken if the student fails to submit a letter of consent from the Sponsor(s) and letter of agreement from the chairperson of the New Department. The student is responsible for bringing all these Forms together with the attachments, to the registrar's office.

**One copy** (Registrar)

**One copy** (Current Department)

**One copy** (New Department)

**One copy** (Student)