

**UNIVERSITY OF EASTERN AFRICA, BARATON**

**CHARTERED LEGAL NOTICE No. 111, 1991**

**Graduate Studies**

**CHANGE OF DEGREE REQUEST FORM**

*(to be filled in triplicate)*

**DATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ UEAB ID No. \_\_\_\_\_\_\_\_\_\_\_\_\_**

FIRST MIDDLE LAST

**I would like to request for a CHANGE OF DEGREE:**

**FROM:**

**Current degree**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Bulletin** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(as indicated in the letter of admission)*

**TO:**

**New degree** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Bulletin** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Attachment(s):**1. ***Copy of letter of admission*** 2. ***Additional supporting documents required by the new degree***

Signature of Applicant **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**NOTED BY THE CHAIRPERSON OF THE DEPARTMENT OFFERING THE CURRENT DEGREE**

Signature of Department Chair **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DECLARATION OF THE CHAIRPERSON OF THE DEPARTMENT OFFERING THE NEW DEGREE**

This is to certify that the Graduate Studies Committee of the Department/School approved this request for recommendation to the Board of Graduate Studies (minutes attached).

Committee Action Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Department Chair **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**FOR OFFICIAL USE**

**BOARD OF GRADUATE STUDIES ACTION:**

Action Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Graduate Studies Director \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date and Stamp \_\_\_\_\_\_\_\_\_\_\_\_

Signature of Registrar \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date and Stamp\_\_\_\_\_\_\_\_\_\_\_\_\_

Copies Distribution: **Registrar’s office**  - 1 copy **Student** - 1 copy **Department** - 1 copy