Tshwane University of Technology

We empower people

APPLICATION TO CHANGE A QUALIFICATION (DEGREE/DIPLOMA/CERTIFICATE) BY A REGISTERED STUDENT

Fax number: 012 382 5134

Year ☐☐☐☐

1st semester ☐

2nd semester ☐

STUDENT NUMBER																									
ID or PASSPORT NO.																									
CURRENT QUALIFICATION																Course code:									
NEW QUALIFICATION																Course code:									

Type of enrollment	Day class:		Evening class:		Block course:	

PERSONAL DETAILS:

Title:		Initials:		Surname:	

Postal address																									
																		Postal code:							

Contact details:	Home phone																								
	Cell phone number																								
	e-mail address																								

SIGNATURE OF STUDENT _____ **DATE** _____

FOR OFFICE USE		
	SIGNATURE	**DATE**
NOT ACCEPTED		
MUST GO TROUGH SELECTION		
ACCEPTED		
WAITING LIST		
ADMISSIONS OFFICE DATA CAPTURER		
COMMENTS		