

University of Nottingham Malaysia Campus Request to Change (Transfer) Study Plan Form

Before completing this form, please ensure you have read the Change of Circumstances procedure and policy on Change of Plan. You must ensure all relevant sections of this form is completed and signed before submission. You should also ensure that you have contacted the Finance Office, and are aware of any implications of this change. The outcome of your application will be sent to you in writing from the Student Registry Office.

Section 1 - Your Details	
Student Name (First name, surname)	Student ID Number (see your ID card)
Section 2 - Study Details	
CURRENT COURSE	
This should be the course and school that you are currently under	
Current Career (e.g. Foundation, UG, PGT etc.)	Current Academic Load (e.g. Full or Part Time)
Current Course Title (Academic Plan Title)	Current Course Code (Academic Plan Code)
Last Date of Attendance on Current Course	Current Year of Study (e.g. 1st year etc.)
Current School/Department	
PROPOSED COURSE This should be the course and school that you are proposing to mo	ove to
New Career (e.g. Foundation, UG, PGT etc.)	
Now Surest (S.g.) Surfaction, SS, 1 S1 Sto.)	New Academic Load (e.g. Full or Part Time)
Now Course Title (Academic Dlay Title)	New Course Code (Academic Dies Code)
New Course Title (Academic Plan Title)	New Course Code (Academic Plan Code)
Start Date on New Course (Day, Month, Year)	Year on New Course (e.g. 1st year etc.)
New School / Department	

Section 3 - Additional Study Details (if applicable) Current Thesis/Dissertation Title New Thesis/Dissertation Title Section 4 - Academic Approval **CURRENT COURSE** This should be signed by the Supervisor and head of school for the student's current school/department I confirm that I am aware of the transfer request. **Current Supervisor (PGR Only):** Full Name (First name, surname) Supervisor's School/Department Signature Date (Day, Month, Year) **Current Head of School / Nominee:** Full Name (First name, surname) Designation (e.g. Head of School, Dean etc.) Signature Date (Day, Month, Year) PROPOSED COURSE This should be signed by the supervisor and head of school for the student's proposed new school/department I approve the above transfer and confirm that the request complies with the policies outlined in the Quality Manual. Any conditions that the student should satisfy prior or subsequent to transferring courses are detailed in Section 6 (below) and have been formally communicated to the student. New Supervisor (PGR Only): Full Name (First name, surname) Supervisor's School/Department Signature Date (Day, Month, Year) **New Head of School / Nominee:** Full Name (First name, surname) Designation (e.g. Head of School, Dean etc.)

Date (Day, Month, Year)

Signature

Section 5 - Other Approvals

SPONSORSHIP OFFICE (For Sponsor Students Only)

If you are sponsored, this change may have implications for your funding. You are required to seek permission from your sponsor through Sponsorship Unit.

Are you currently funded by an officially recogn	nised sponsor? Please tick below:
Yes	
No	
If yes, please give the name of your sponsor	
Name of Sponsor	Reference number
On behalf of the sponsorship office, I confirm the will have on his/her sponsorship.	at the student has been fully informed of the implications this transfer
Full Name (First name, surname)	Designation (e.g. Sponsorship Ass. Manager etc.)
Signature	Date (Day, Month, Year)
transfer will have on his/her immigration status obliged to report this transfer to the Malaysia Ir	student has been fully informed of the implications this course in Malaysia. The student has been told that the University may be
Full Name (First name, surname)	Designation (e.g. Visa Manager etc.)
Signature	Date (Day, Month, Year)
Note: Visa Office's advice that an overseas student h	nas the right to remain in Malaysia does not mean that Academic Approval has
Section 6 - Conditions (if applicable)	

This plan change is subject to the following conditions being met to the satisfaction of the relevant Head of School (or

nominee). Please continue on an additional sheet if necessary, the sheet should be signed.

UNMC Request to Change Study Plan Form. Version 2, updated August 2018

Section 7 - Courses (Modules) to be added/dropped (Not applicable for Foundation and PGR students)

Please complete this section and ask the course convenor to sign to indicate their agreement to the changes below.

Add/Drop	Session (e.g. Autumn)	Course Code	Course Title	Credit Unit	Staff Approver Name (First Name, Last Name)	Staff Approver Signature

Section 8 - Student Declaration

I confirm that these courses (modules) entry changes are suitable for my plan and have been approved by the
School/Department running the courses (modules). The information I have provided in this form is correct and
complete to the best of my knowledge. In submitting this form, I give my consent for this information to be disclosed
to relevant officers of the University responsible for considering my request. I understand that the request will be
kept on my University record.

Student Signature	Date (Day, Month, Year)		