**CHANGE OF SCHOOL APPEAL FORM**



**University of Zambia**

**FORM FOR LODGING AN APPEAL FOR CHANGE OF SCHOOL**

**SECTION 1. PERSONAL DETAILS**

|  |  |  |  |
| --- | --- | --- | --- |
| **Surname:** | Enter text | **Other name(s):** | Enter text |

|  |  |
| --- | --- |
| **Computer number:** | Enter text |

|  |  |
| --- | --- |
| **School in which you are registered:** | Enter text |

|  |  |
| --- | --- |
| **School to which you wish transfer:** | Enter text |

|  |  |
| --- | --- |
| **Programme in which you wish to be admitted:** | Enter text |

**Contact details for correspondence relating to your appeal (communication will be by email):**

|  |  |
| --- | --- |
| Email address: | Enter text |
| Postal address: | Enter text |
|  | Enter text |
|  | Enter text |
| Telephone: | Enter text |

***Note carefully that a student who wishes to change programmes must have cleared all courses in the programme he or she is following before the change. The motivation to change programmes must be in related to a career change, be well-intended and not be forced by the consequences of poor academic results.***

**SECTION 3. REASONS FOR CHANGING**

Click the relevant box(es):

|  |  |
| --- | --- |
| [ ]  | **Career Change:** My career interests have changed and I wish to obtain a different qualification |
| [ ]  | **Academic Grounds:**I am academically unprepared for the demands of the programme I am following |
| [ ]  | **Financial Grounds:**I am not able to meet fully the fees charged for the programme I am are following  |

**SECTION 4. DETAILS OF THE APPLICATION**

Use the relevant box(es) below to **explain in full** the grounds on which your application is based and also the other details as follows:

**Detailed description of your claim**

|  |
| --- |
| Enter text |

**Relevant third party evidence to support your application**List the documents you are submitting with this form. Documentary evidence should be scanned and submitted electronically wherever possible. Please note that:

1. Evidence must be supplied in English. If the original is in another language, you must obtain and submit a **certified** copy in English.
2. The evidence should be dated.

|  |
| --- |
| Enter text |

`

**SECTION 5. CHECKLIST**

Click box to select:

|  |  |
| --- | --- |
| [ ]  | I have read and understood the [‘**Appeals for Change of School - Guidelines for Students**’](http://www2.le.ac.uk/offices/sas2/regulations/appeals-complaints/appeals) |
| [ ]  | I have provided on/with this form **all** the information that I wish to be consider in relation to my appeal |

**SECTION 6. DECLARATION**

***By submitting this form: I declare that the above information is accurate and true; I confirm that the details of this application are complete and can be passed on to the relevant University staff considering this case; I confirm that I have included relevant third party documentary evidence to support my case (where applicable).***

**SECTION 7. SUBMISSION OF THE APPLICATION FORM**

Submit the completed appeal form and supporting evidence to the email address given below to be received **before** the expiry of the appeal submission deadline. Appeals should be submitted electronically wherever possible.

|  |  |
| --- | --- |
| **Date of submission:** | Enter text |

**Submit the appeal by email to:** **dean.xxx@unza.zm** **(please obtain correct email address)**

**SECTION 8: RESOLUTION OF THE APPEAL**

1. **DEAN MAKES CONSULTATIONS IN THE SCHOOL AND THE SCHOOL TO WHICH THE STUDENT WISHES TO TRANSFER**

**Dean’s comments:**

|  |
| --- |
| Enter text |

1. **ADMISSIONS AND QUOTAS COMMITTEE CONSIDERATIONS**

**Committee’s comments:**

|  |
| --- |
| Enter text |

|  |  |
| --- | --- |
| Change of school approved  | [ ]  |
| Change of school not approved  | [ ]  |

1. **ACADEMIC OFFICE NOTIFICATION**

|  |  |
| --- | --- |
| **Date of Receipt of Committee’s Comment:** | Enter text |