Indicate type of student

☐ Self-sponsored

☐ Government sponsored

KCA UNIVERSITY ~1989~

STUDENT ACADEMIC REQUISITION FORM
Request for Defer of Admission / Academic Leave / Change of Course / Study Mode / Appeals / Termination of

Course / Change of Campus

NAME: …………………………….................……….. ADM NO/REG: …………………………………

COURSE: ………………………………………………… MOBILE NO: …………………………………..

DATE: …………………………………………….. SIGN: ……………………………………………

I hereby request for (Tick relevant option/s)

☐ **Academic Leave:** From…………………….…… To…………………………………...

  Reason…………………………………………………………………………………………

☐ **Defer of Admission:** From…………………….…… To…………………………………..

  Reason…………………………………………………………………………………………

☐ **Change of Campus:** From…………………….…… To…………………………………...

  Reason…………………………………………………………………………………………

☐ **Change of Course:** From…………………….…… To…………………………………..

  Reason…………………………………………………………………………………………

☐ **Change of Mode of Study:** From…………………….…… To…………………………………...

  Reason…………………………………………………………………………………………

☐ **Termination of Course**

  Reason**………………………………………………………………………………………………**

☐ **Appeal (attach your appeal letter)**

☐ **Readmission**

☐ **Resumption (From leave)**

APPROVALS

A. Comment from Dean/ Director of Faculty/School

  Approved…………………Not Approved…………………..

  Reason…………………………………………………….

B. Comment from Credit Controller

  Approved…………………Not Approved…………………..

  Reason…………………………………………………….

C. Comment from Registrar

  Approved…………………Not Approved…………………..

  Reason…………………………………………………….

FOR OFFICIAL USE ONLY	
Name Signature	
Library	
Dean / Director	
Credit Controller	
Registrar	

"Advancing Knowledge, Driving Change"