



APPEAL TO CONTINUE STUDY FORM

APPLICANT PARTICULARS

Name

Student No.

Telephone No.

Status : Failed / Terminated

Faculty : _____

Programme : _____

Intake : _____ Appeal Session : _____

Grade Point Average (GPA) : _____ Cumulative Grade Point Average (CGPA) : _____

Reason to Appeal : _____

Signature : _____ Date : _____

HEAD OF PROGRAMME	DEAN	STUDENT FINANCE UNIT						
Signature & Verification Date:	Signature & Verification Date:	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 20px; height: 20px;"></td><td>i-register fees</td></tr> <tr><td style="width: 20px; height: 20px;"></td><td>Processing fees</td></tr> <tr><td style="width: 20px; height: 20px;"></td><td>Outstanding fees</td></tr> </table> Signature & Verification Date:		i-register fees		Processing fees		Outstanding fees
	i-register fees							
	Processing fees							
	Outstanding fees							

RECORDS & CONVOCATION UNIT		
Approval :		
Appeal to Continue Study Committee Meeting	<input type="checkbox"/> No...../.....	
Senate Meeting	<input type="checkbox"/> No...../.....	Signature & Verification
Academic Affairs Division Meeting	<input type="checkbox"/> No...../.....	Date:

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