

**REQUEST TO CHANGE MODE OF STUDY BETWEEN FULL-TIME AND PART-TIME**

**Only to be used following discussion with:**

**Undergraduate Students: Student Services**

**Postgraduate Students: Course Director/Supervisor**

<b>Section A – to be completed by student</b>	
Name:	Student ID Number 500_ _ _ _ _
Change of Mode of Study from : <b>Full-time to Part-time</b> / <b>Part-time to Full-time</b> (delete as appropriate)	
Degree Program and Subject	