

Application for Department / Program Change



Date:

To
The Registrar
United International University
United City, Madani Avenue,
Badda, Dhaka-1212.

Sir

With due respect, I beg to state that I am a student of your university and my present CGPA is . I would like to change my department / Program from to . For this purpose, I have enclosed a 'Clearance Form' duly filled in with clearances from the concerned departments/ offices.

I sincerely hope you will consider my request and grant approval for the department / Program change.

Full Name:	<input type="text"/>
ID Number:	<input type="text"/>
Contact No:	<input type="text"/>
E-mail Address:	<input type="text"/>

Yours obediently,

(Signature of the Applicant)

(Signature of the Guardian)
(Father/Mother/Local Guardian)

<p><u>Present Department/Program:</u></p> <p><input type="checkbox"/> Recommended</p> <p>_____ Signature and Date (Head of the Dept.) Department:.....</p>	<p><u>New Department/Program:</u></p> <p><input type="checkbox"/> Recommended</p> <p>_____ Signature and Date (Head of the Dept.) Department:.....</p>
<p><u>Office of the Controller of Examinations:</u></p> <p><input type="checkbox"/> Recommended for New ID No.</p> <p><input type="text"/></p> <p>_____ Signature and Date</p>	<p><u>Approval of the Registrar:</u></p> <p><input type="checkbox"/> Approved</p> <p>_____ Signature of the Registrar</p>

❖ Department change will not be allowed for a student in probation.

CLEARANCE FORM



(For Change of Department/Program)

Please, Indicate your Student Type: Undergraduate Graduate

Student Name:			
Student ID:		Dept:	
Student Signature:		Date:	

CONFIRMATION OF CLEARANCE

DEPARTMENT	SIGNATURE OF AUTHORIZED PERSONNEL	REMARK
Director of Student Affairs 1 st Floor, Room # 121		
Logistics and Procurement Office 1 st Floor, Room # 112		
Library Ground Floor		
IT 5 th Floor, Room # 518		
Laboratories 5 th Floor, Room # 506		

NOTE:

- This form is to be filled in at the time of applying for Changing Department/ Program and submitted to the Office of the Controller of Examinations with clearance from each of the above-mentioned departments /offices.

Additional Course Form



Date:	
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To
The Controller of Examinations
United International University
United City, Madani Avenue, Badda, Dhaka.

Subject: Application for mentioning / not mentioning additional course(s) in Official Transcript.

Sir/Madam,

I am a student of this university. I have completed my degree/ I have changed my department from to During my study period I have registered/ completed the following additional course(s). Now I would like to request you to mention/ not mentioning the course(s) in my Official Transcript.

Sl.	Course Code and Title	Grade	Tick (√) mark only
1.			Please mention/ not to be mentioned
2.			Please mention/ not to be mentioned
3.			Please mention/ not to be mentioned
4.			Please mention/ not to be mentioned
5.			Please mention/ not to be mentioned
6.			Please mention/ not to be mentioned

I would like to request you to take necessary steps in this regard and oblige me thereby.

Yours truly,

(Signature of the applicant)

Student Name:	
Student ID:	

<u>Department/Program Office :</u>	<u>Office of the Controller of Examinations:</u>
<input type="checkbox"/> Recommended	<input type="checkbox"/> Recorded
_____ Signature and Date (Head of the Dept./ Program)	_____ Signature and Date (Controller of Examinations)

Please note that:

Grade(s) of additional course(s) is/are not taken into consideration for GPA/ CGPA calculation.