



**STUDENTS MARK CHANGE REQUEST FORM**

**Instructions**

- Please fill in the details requested
- Be cleared by the Registrar’s office.
- A student will only be allowed to apply for a mark change within the current academic year or at the earliest term when the Examination result is received.
- Please make a copy of this form and return the original to the Registrar’s office. Keep your copy until you receive results for all mark changes requested.

**STUDENT DETAILS**

Date: ..... Telephone: .....

Name of Student: ..... Admission No: .....

Year of Study: ..... Semester: .....

School/Department:.....

Programme: ..... Specialization: .....

Unit Code	Unit Title	Semester Examination was taken	Lecturer’s Name

Reason(s) for mark change request(s)

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**FOR HOD/ Dean USE ONLY**

The Department/School is satisfied the student named above met all requirements for the course indicated and may be allowed to proceed to request for the mark change:

Approved/Not approved by: ..... Sign: ..... Date: .....  
*Dean/HOD*

Registrar’s clearance: ..... sign: ..... Date: .....

**\*Final Approval for this mark change will be made by the VC/DVC**