UNIVERSITY OF KWAZULU-NATAL ™

INYUVESI YAKWAZULU-NATALI

CONFERRED QUALIFICATION

CSR 10

APPLICATION TO ALTER THE QUALIFICATION NAME OF A CONFERRED QUALIFICATION.

The steps to be followed:

1. *The College to complete **PART A**.*

2. *The QPA Office to complete **PART B**.*

3. *The Dean and Head of School to complete **PART C** (Minutes of the CAAB must be attached).*

4. *The Registrar to complete **PART D***

5. ***The College must attach a confirmation that the information has been changed on the ITS system.***

6. ***If the alteration affects all graduates in a specific qualification, a list, which includes the student numbers, full names, and surnames, must be attached.***

PART A: COLLEGES

Name of the College………………………………………………………………………………………

Name of the School……………………………………………………. School no……………………

Qualification name ………………...……………………………………………………………………………

Month/Year of C o n f e r m e n t …………………………………………………………………………

SAQA ID no………………………………………………..

Correct/New Qualification: …………………………………………............………: …………………………

SAQA ID no:……………………………………………………………………………......................................

NQF Level:……………………………………………………………………….

Student number………………………………………………………….

Student name(s) & Surname………………………………………………………………………………….

Detailed Motivation by Manager: College Academic Services

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Manager: CAS: …………………………………. Signature: …………………………..Date: ………………………

PART B: QPA OFFICE

Motivation in support of the application:…………………………………………………………………...........................

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DIRECTOR…………………………………. SIGNATURE……………………………………. Date……………………….

PART C: Confirmation by Dean and Head of School

Date of the CAAB meeting: ……………………………………………………………………………………

The minutes of the CAAB are attached. | YES | | NO |

Comments……

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Dean and HoS: …………………………………………Signature: ……………………………………Date: ………………………….

PART D: REGISTRAR

Registrar's directives………………………………………………………………………………………….

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Graduation programme to be amended: | YES | | NO |

Reprint degree/Diploma certificate: | YES | | NO |

APPROVED / NOT APPROVED

…………………………….   ……………………………. Date
Registrar