**SHSPH Exam Enrolment Form**

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| --- | --- |
| **NAME** |  |
| **STUDENT NUMBER** |  |
| **PROGRAMME REGISTERED FOR (MPH, MMED, etc)** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **CODE** | **INDICATE CHOICE (x) or name of paper** | **DETAILS** | **Date** |
| PHM 871\* MPH Core exam |  | N/A |  |
| PHM 872\*\* MPH exam (Academic Unit) |  | Track:  |  |
| MMed Exam ASW 800/EBD 800ONO 800 |  |  |  |

*\* Please note that the entry criteria to enrol for the PHM 871 examination are the successful completion of all core modules except scientific writing (HMS 871)*

*\*\* Please note that the entry criteria to enrol for the PHM 872 examination are the successful completion of all the compulsory modules.*

*Students* must ensure that they meet these criteria before enrolling for these exams.

\*\*\**Please* note that the deadline for registration is a month before the exam date.

**I hereby confirm that I meet all the requirements for enrolment of the exam/s:**

**Student Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Contact details in case of cancellation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**All registrations for exams must go through the Student Administration Office**

**Tel: +27 (0) 12 354 2409 Fax: +27 (0) 12 354 1750**

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