**School of Health Systems and Public Health**

**Faculty of Health Sciences**

**University of Pretoria**

Master of Public Health: Change of Track application

***Instruction:*** *Please complete the details below and ensure that the form has been signed. The signed form has to be submitted to Dr B Harris (bernice.harris@up.ac.za) and Mr L Mpati (lesiba.mpati@up.ac.za) for consideration at the Teaching and Learning Committee (TLC) of the SHSPH.*

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| **STUDENT DETAILS** |

|  |  |
| --- | --- |
| Name and surname: |  |
| Student number: |  |
| Year of study: |  |

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| **TRACK DETAILS** |

|  |  |
| --- | --- |
| Current track: |  |
| Proposed new track: |  |

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| **REASON FOR CHANGE OF TRACK** |

*Instruction: Please motivate below why you want to change track:*

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|  |
| Signature: Student |

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| --- | --- | --- | --- | --- | --- | --- | --- |
| Approved |  | Not approved |  | Approved |  | Not approved |  |
|  |  |
| Signature: Current Track Head | Signature: Proposed Track Head |
| Date:  |  | Date:  |  |