

UNIVERSITEIT VAN PRETORIA / UNIVERSITY OF PRETORIA
FAKULTEIT GESONDHEIDSWETENSKAPPE / FACULTY OF HEALTH SCIENCES
AANSOEK OM KREDIET VAN MODULES /
APPLICATION FOR CREDIT OF MODULES (TRANSFER CREDITS)

LW: 'N OORSPRONKLIKE BEWYS TEN OPSIGTE VAN MODULES ELDERS GESLAAG MOET HIERDIE AANSOEK VERGESEL.
 HIERDIE VORM MOET BY U BETROKKE FAKULTEIT SE STUDENTEADMINISTRASIE INGEDIEN WORD.

NB: THE ORIGINAL PROOF IN RESPECT OF MODULES PASSED ELSEWHERE MUST ACCOMPANY THIS APPLICATION.
 THIS FORM MUST BE SUBMITTED TO THE STUDENT ADMINISTRATION OF THE FACULTY CONCERNED.

Van, voort. titel/ Last name, Initials, title	Studentenommer/ Student number	Akad. Program/ Acad. Program	Termyn/ Term	20....	Akad. jaar/ Acad. year
---	-----------------------------------	---------------------------------	-----------------	--------	---------------------------

Kode(s) waarvoor krediet verlang word / Code(s) for which credit is required

Kode van module/ Code of course	Ooreenstemmende module geslaag/ Corresponding course passed	Jaar waarin module geslaag is & % / Year in which course was passed & %		Tersiêre instelling waar module (vak) geslaag is / Tertiary institution where module (subject) was passed	VIR KANTOORGEBRUIK / FOR OFFICE USE:		
		Jr / Yr	%		Goedgekeur/ Approved		Aanbeveling/Handtekening: Hoof van Departement of Programbestuurder/ Recommendation/Signature: Head of Dept. or Programme Manager
					Yes	No	

Beskik u oor volle Matrikulasievrystelling? JA / NEE
 Do you have full Matriculation exemption? YES / NO

Jaar verwerf:
 Year obtained:

Het u die graad verwerf waarvoor bogenoemde module(s) vereis was? JA / NEE
 Did you complete the degree for which the above course(s) were needed? YES / NO

.....
 STUDENT

.....
 DATUM / DATE

VIR KANTOORGEBRUIK / FOR OFFICE USE:

nms DEKAAN / for DEAN:

.....
 Datum / Date

KREDIETE OP STUD.REKORD DEUR: /
 CREDITS ON SYSTEM BY:

.....
 Datum / Date