**Request for Changes to Research Programs**

Postgraduate Studies Division

Faculty of Architecture

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Student’s Name** | |  | | | |
| **Registration No** | |  | **Type of Present Registration** | | (Full Time/ Part Time) |
| **Degree Program** | | MSc. /MPhil/PhD. /Unspecified Degree | | | |
| **Department** | |  | | | |
| **Present Research Topic** | |  | | | |
| **Present Supervisor/ s** | |  | | | |
| **Date of Commencement** | |  | | | |
| **Date of Last Registration** | |  | | | |
|  | |  | | | |
| **Changed Requested** | | | | | |
| Title only | | | |  | |
| Topic | | | | (New one page Proposal should be included) | |
| Supervisor/s | | | |  | |
| Full Time to Part Time | | | |  | |
| Part Time to Full Time | | | |  | |
| Transfer from MPhil. To PhD. | | | |  | |
| Other | | | | Please specify | |
|  | | | |  | |
| **A. Change Title only** | | | | | |
| Present Title |  | | | | |
| New Title |  | | | | |
| Reason for change |  | | | | |
|  |  | | | | |
| **B. Change of Topic & Proposal** | | | | | |
| Present Topic |  | | | | |
| New Topic |  | | | | |
| Reason for change |  | | | | |
| **Please attach new proposal signed by all the Supervisor/s and Head of the Department** | | | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **C. Change of Supervisor/s** | | | | | | | | | | | | |
| Present Supervisor/s | |  | | | | | | | | | | |
| Proposed Supervisor/s\* | |  | | | | | | | | | | |
| Reason for change | |  | | | | | | | | | | |
| \*underline the change | | | | | | | | | | | | |
| **D. Change of Registration from Full Time Part Time** | | | | | | | | | | | | |
| Number of Months of Full Time study completed | | | | | | |  | | | | | |
| Reason for request to change | | |  | | | | | | | | | |
| Contact Address during Part Time Study | | |  | | | | | | | Telephone Number during Part Time Study | | |
|  | | |
|  | | | | | | | | | | | | |
| **E. Change of Registration from Part Time to Full Time** | | | | | | | | | | | | |
| Number of Months of Part Time study completed | | | | | | | |  | | | | |
| Has leave of absence been granted  (Please attach letter from present employer) | | | | | | | |  | | | | |
| Reason for request to change | | | |  | | | | | | | | |
|  | | | | | | | | | | | | |
| **F. Transfer to PhD.** | | | | | | | | | | | | |
| Progress Review Date | | | |  | | | | | | | | |
| Results | | | |  | | | | | | | | |
| Reason for change | | | |  | | | | | | | | |
|  | | | | | | | | | | | | |
| **G. Other Request for Change** | | | | | | | | | | | | |
| Request for change | | | | |  | | | | | | | |
| Present Situation | | | | |  | | | | | | | |
| Situation after Requested Change | | | | |  | | | | | | | |
| Reason for Request | | | | |  | | | | | | | |
| Signature of Student | | | | |  | | | | Date | |  | |
|  | | | | | | | | | | | | |
| **Recommendations** | | | | | | | | | | | | |
| (Supervisor) | (Research Coordinator) | | | | | (Head of Department) | | | | | | (Director - PGS) |