



# APPROVAL OF COURSE SELECTION

This form serves to confirm that (full name) \_\_\_\_\_ (student number) \_\_\_\_\_

will be given credits for the courses taken as listed below during his/her (year of study) \_\_\_\_\_ year exchange program at

(Name of Host/Partner University) \_\_\_\_\_.

Course Code at Wits	Course Name at Wits	Course Code at Host/Partner University	Course Name at Host/Partner University	Course credits to be allocated	Relevant School / Faculty

**Condition:** The courses will only be credited on receipt of the official transcript from the Host/Partner University and approved by the Head of Department/School.

\_\_\_\_\_  
\_\_\_\_\_

**NB:** Before departure confirm with your Faculty Office your registration as an exchange student e.g. *WINF*.



NAME: \_\_\_\_\_

DESIGNATION: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

