



**LEADING THE WAY**  
KHALIFAH · AMĀNAH · IQRA' · RAHMATAN UL-ĀLAMĪN



**KAED-ACAD-04**

AN INTERNATIONAL AWARD-WINNING INSTITUTION FOR SUSTAINABILITY

VERSION NO : 01

**KULLIYAH OF ARCHITECTURE AND ENVIRONMENTAL DESIGN**

REVISION NO : 01

**APPLICATION TO CHANGE OF PROGRAMME (WITHIN KULLIYAH)**

EFFECTIVE DATE: 01/09/2019

**Important Notes:**

1. Students should **complete at least one (1) semester** in the original programme in the Kulliyyah before applying for change of programme.
2. Change of programme only applies to students whose credits attempted are **not more than forty (40) credit hours**.
3. A change of programme is only allowed once during the student's duration of studies.

**SECTION A : PERSONAL BACKGROUND**

|                              |       |  |                  |
|------------------------------|-------|--|------------------|
| Name :                       |       | Matric No :                            |                  |
| Mahallah & Room No. :        |       | Nationality :                          |                  |
| Age :                        | Sex : | Marital Status :                       | IC/Passport No : |
| Sponsorship :                |       | Year/Level :                           |                  |
| Address of Parent/Guardian : |       | No. of Dependants of Parent/Guardian : |                  |
|                              |       | Occupation of Parent/Guardian :        |                  |
|                              |       | Phone No :                             |                  |
|                              |       | Email :                                |                  |

**SECTION B : ACADEMIC PERFORMANCE**

Name of Programme :

| Semester | GPA | CGPA |
|----------|-----|------|
|          |     |      |
|          |     |      |
|          |     |      |

*Note : Please attached all copies of the previous semester results (result slip/partial transcript)*

**SECTION C : REASON AND JUSTIFICATION FOR CHANGE OF PROGRAMME**

**SECTION D : PROGRAMME PREFERENCE/INTENDED FOR CHANGE OF PROGRAMME**

|  |  |
|--|--|
| <input type="checkbox"/> Bachelor of Applied Arts and Design (Honours)         | <input type="checkbox"/> Bachelor of Quantity Surveying (Honours)          |
| <input type="checkbox"/> Bachelor of Landscape Architecture (Honours)          | <input type="checkbox"/> Bachelor of Urban and Regional Planning (Honours) |
| <input type="checkbox"/> Bachelor of Science (Architectural Studies) (Honours) | <input type="checkbox"/> Bachelor of Interior Architecture (Honours)       |

**SECTION E : DECLARATION BY STUDENT**

Student's Signature : \_\_\_\_\_ Date : \_\_\_\_\_

**SECTION F : FOR OFFICE USE ONLY**

**RECOMMENDATION BY ACADEMIC ADVISOR**

Academic Advisor of the **present programme**

|                          |                 |           |       |
|--------------------------|-----------------|-----------|-------|
| <input type="checkbox"/> | Recommended     | Comment : | _____ |
| <input type="checkbox"/> | Not Recommended |           | _____ |

Student's Signature : \_\_\_\_\_ Date : \_\_\_\_\_

Academic Advisor of the **intended programme**

|                          |                 |           |       |
|--------------------------|-----------------|-----------|-------|
| <input type="checkbox"/> | Recommended     | Comment : | _____ |
| <input type="checkbox"/> | Not Recommended |           | _____ |

Student's Signature : \_\_\_\_\_ Date : \_\_\_\_\_

**RECOMMENDATION BY HEAD OF DEPARTMENT**

Head of Department of the **present programme**

|                          |                 |           |       |
|--------------------------|-----------------|-----------|-------|
| <input type="checkbox"/> | Recommended     | Comment : | _____ |
| <input type="checkbox"/> | Not Recommended |           | _____ |

Student's Signature : \_\_\_\_\_ Date : \_\_\_\_\_

Head of Department of the **intended programme**

|                          |                 |           |       |
|--------------------------|-----------------|-----------|-------|
| <input type="checkbox"/> | Recommended     | Comment : | _____ |
| <input type="checkbox"/> | Not Recommended |           | _____ |

Student's Signature : \_\_\_\_\_ Date : \_\_\_\_\_

**RECOMMENDATION BY DEPUTY DEAN**

Deputy Dean (Student Development and Community Engagement)

|                          |                 |           |       |
|--------------------------|-----------------|-----------|-------|
| <input type="checkbox"/> | Recommended     | Comment : | _____ |
| <input type="checkbox"/> | Not Recommended |           | _____ |

Signature & Stamp : \_\_\_\_\_ Date : \_\_\_\_\_

Deputy Dean (Academic and Internationalization)

|                          |                 |           |       |
|--------------------------|-----------------|-----------|-------|
| <input type="checkbox"/> | Recommended     | Comment : | _____ |
| <input type="checkbox"/> | Not Recommended |           | _____ |

Signature & Stamp : \_\_\_\_\_ Date : \_\_\_\_\_

**APPROVAL BY THE DEAN**

|                          |              |           |       |
|--------------------------|--------------|-----------|-------|
| <input type="checkbox"/> | Approved     | Comment : | _____ |
| <input type="checkbox"/> | Not Approved |           | _____ |

Signature & Stamp : \_\_\_\_\_ Date : \_\_\_\_\_



