UNISA university of south africa

DSAR02

Addition and cancellation application form (you can also add and cancel modules on myUnisa)

Initials & surname										
Student number					-				-	
Qualification										
Specialisation										

Addition of study units							
Study units	**Exam period**				**Exam period**		
	S1	**S2**	**Y**		**S1**	**S2**	**Y**
Will your qualification be completed with this registration?						Yes	No

Cancellation of study units (please take note of exclusion from studies before cancelling any study unit/s)			
Study unit	**Study unit**	**Study unit**	**Study unit**

Please note: You will forfeit the minimum fee per module cancelled		
Cancellation of qualification	Yes	No
Do you want to cancel all the study units registered for this academic year?	Yes	No

Declaration: I declare that all the particulars furnished by me on this form are true and correct. I undertake to comply with all the rules, regulations and decisions of the university and any amendments thereto, and I have taken note of advice that may be applicable to students in general. I, as a student registered with Unisa or an applicant intending to study with Unisa, hereby consent that Unisa may collect, use, distribute, process and communicate my personal information for all required academic purposes pertaining to my application / registration to study with Unisa, which may include, but is not limited to, internal administrative processing, institutional and scholarly research, funding submissions, processing by the Matriculation Board and Admissions Committees, Higher Education South Africa, the Department of Higher Education and Training, the Council on Higher Education, the South Africa Qualifications Authority, other public higher education institutions and Qualification Verification Agencies. I confirm that I have read the notice and understand the contents thereof.

Signature		Y	Y	Y	Y	M	M	D	D

RMC: File	**Operator code**	**Signature**	**Date**

This form should be submitted via e-mail to study-info@unisa.ac.za
Please include your student number and the name of the form (DSAR02) in the subject line of the e-mail.