

UNIVERSITY OF TECHNOLOGY, MAURITIUS

Request for Exemption(s) - Academic Year:

SCHOOL OF



UNIVERSITY
TECHNOLOGY,
MAURITIUS

Programme: _____

Year/Cohort : _____

Student Name: _____

Student ID: _____

| Year/Level | Exemption Requested for | | Equivalent Module completed | Grade | Qualification, Institution (e.g. Dip. Comp. Science, Univ. of South Africa) | Date of Completion | For Official Use Programme Director's/Coordinator's Recommendation |
|------------|-------------------------|-------------|-----------------------------|-------|--|--------------------|---|
| | Module | Module Code | | | | | |
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Enclosures

- 1. Certified copies of Syllabi for Equivalent Module undertaken.
- 2. Certified copies of examination results with grades.

Declaration

Signature of Student : _____

Date : _____

Name : _____

Signature: _____

Date : _____

- Note :**
1. Please submit this completed form plus enclosures to the respective School Registry
 2. Forms submitted without any relevant documents as mentioned above will not be considered.
 3. Applications for exemption to be submitted within 10 working days of commencing the programme
 4. Request for exemption for the whole programme will be considered only once
 5. The qualification under consideration should be from a recognized institution
 6. The qualification under consideration should not have been awarded for more than six years from the date of application
 7. Content of module should be relevant
 8. Please use additional form(s) if required