

STUDENT EXCHANGE MODULE REGISTRATION FORM (DOUBLE MAJOR / MINOR / EXTENSION)

Full Name: _____ Student ID: _____

Programme at Taylor's University: _____

Exchange Semester (Month & Year): _____

Host Institution and Country (credit transfer only): _____

Programme at Host Institution (credit transfer only): _____

Please tick if you are deferring a semester during your exchange (just complete section B and get your PD to verify)

A. Host Institution			Taylor's University (applicable for credit transfer)		
Module Code	Module Name	Credits	Module Code	Module Name	Credits
Total Credits			Total Credits		

B. Immediate modules to be undertaken at Taylor's University upon returning from Student Exchange Programme

Semester: _____

Module Code	Module Name	Credits
Total Credits		

Verified by:

Name:
Programme Director
Date: