

**UNIVERSITY OF ESWATINI – INSTITUTE OF DISTANCE EDUCATION
REGISTRATION FORM – ACADEMIC WARNING STUDENT**

Declaration by Student: I understand that to proceed conditionally with an academic warning, I have obtained a GPA of less than 2.00 at the end of the previous semester. I shall be allowed to proceed from one semester to another but cannot take more than fifteen (15) Credits this semester. Such credit limit does not apply to Field Attachment and Teaching Practice. I have checked my course structure and have selected courses that will add to a total of 15 credits.

NAME OF STUDENT: _____ STUDENT ID: _____

PROGRAMME OF STUDY: _____ SEMESTER: _____

CONTACT NUMBER: _____ EMAIL: _____

COURSES TO BE TAKEN:

COURSE CODE	COURSE FULL NAME

STUDENT'S SIGNATURE: _____

(FOR REGISTRY OFFICE USE ONLY)

ACTIONED BY: _____

SIGNATURE: _____ DATE: _____

UPON RECEIPT OF AN EMAIL INDICATING THAT YOUR REGISTRATION HAS BEEN COMPLETED, CHECK YOUR ENROLMENT DETAIL IN YOUR REGISTRATION PORTAL AND PRINT YOUR PROOF OF REGISTRATION.