

College of Chemical Sciences, Institute of Chemistry Ceylon

**TRANSFER FORM
(GIC to BSc & BSc to GIC)**

Name :

Registration No :

Programme enrolled in currently :

Date of enrolment in the above programme :

Current level of study :

Advanced Level results / year:

.....

I wish to transfer to the programme.

.....

Signature of student

.....

Date

For Office use only

Student satisfies/does not satisfy the A/L requirement for the requested transfer.

.....
Assistant Programme Coordinator/Programme Coordinator

.....
Date

Student satisfies / does not satisfy the academic requirements of CCS for the requested transfer.

.....
AR/Examinations

.....
Date

Document was tabled at themeeting of ABCCS held on.....

Decision : transfer was

Effective date of transfer :

.....
Assistant Programme Coordinator/Programme Coordinator

.....
Date