

**UNIVERSITY OF
ZULULAND**



ASSESSMENT MANAGEMENT

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KWADLANGEZWA

3886

South Africa

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ACADEMIC HISTORY CAPTURE (FORM)

Campus	Kwa-Dlangezwa		Richards Bay	
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Requested by Prof, Dr, Rev, Ms.....

Reason for change/capture of marks.....

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Module Code (e.g. CACC102)

STUDENT NUMBER	STUDENT NAME	Mark to change	New Mark	DP	EXAM MARK	FINAL MARK
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						

PLEASE COMPLETE DETAILS IN THE SECTION BELOW

Authentication	Approval (Head of Dept.)	Approval (Dean of Faculty)	Assessment Manager	Registrar
Name (Print)				
Staff Number				
Date				
Signature				

FACULTY STAMP

NB: Make sure that you close the form after the entry of the last student.