



**FOR INTERNAL USE**

**ACTION TAKEN BY THE HEAD OF DEPARTMENT  
(Required for Academic Issues)**

Briefly describe your observations after the discussion you had with the student.

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SIGNATURE OF HEAD OF DEPARTMENT.....DATE .....

**ACTION TAKEN BY THE DEAN OF SCHOOL/ACADEMIC DEAN/CAMPUS DIRECTOR**

Briefly describe your observations after the discussion you had with both the student and the Head of the Department.

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SIGNATURE OF THE SCHOOL DEAN/ACADEMIC DEAN/CAMPUS DIRECTOR .....

DATE .....