

MIGRATION OF ASSIGNMENT LOCATION FORM

| | |
|------------------------------------|--|
| Date | |
| Full Name [as per passport] | |
| Registration Number | |
| Program enrolled in | |
| Location | |
| Mobile Phone | |
| Email Address | |

Location to be migrated to [Please tick]:

- Abu Dhabi
- Dubai
- Sharjah
- Al Ain

Course to be migrated [Please tick]:

- Developing Strategic Mgt and Leadership Skills
- Professional Development for Strategic Mgrs
- Strategic Change Management
- Creative and Innovative Management
- Strategic Marketing Management
- Strategic Human Resource Management
- Strategic Quality and Systems Management
- Strategic Supply Chain Management and Logistics

Reason for Migration:

Student Signature: _____

| | | |
|---|-----------------------------------|---------------------------------------|
| For Office Use Only [The candidate should not fill in this area] | | Date: _____ |
| Received by: _____ | <input type="checkbox"/> Approved | <input type="checkbox"/> Not Approved |
| Comment: _____ | | |
| Academic Director Signature: _____ | Chairman Signature: _____ | |

Please email the form to 'sharmila@ccisuae.com'