

## COURSE SELECTION FORM

**Semester:**  Fall (Sep. to Dec.)  Winter (Jan. to Apr.)  Summer (May to Aug.; May to Jul.; or Jul. to Aug.)

**Status**  Degree  Non-degree  New transfer  30 Credit Certificate: VAC \_\_\_\_ Studio Certificate \_\_\_\_

International student visa  Exchange from \_\_\_\_\_

Visiting from \_\_\_\_\_ Letter of Permission Required: Attached \_\_\_\_ Pending \_\_\_\_ 1.0

### Contact details

LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_ ID NUMBER \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ PROVINCE/STATE \_\_\_\_\_ POSTAL CODE \_\_\_\_\_

EMAIL \_\_\_\_\_ TELEPHONE \_\_\_\_\_ ALTERNATE TELEPHONE \_\_\_\_\_

### 2.0 First choice courses

| CODE | SECTION | CREDITS | COURSE NAME | DAYS | TIMES | INSTRUCTOR NAME OR SIGNATURE |
|------|---------|---------|-------------|------|-------|------------------------------|
|      |         |         |             |      |       |                              |
|      |         |         |             |      |       |                              |
|      |         |         |             |      |       |                              |
|      |         |         |             |      |       |                              |
|      |         |         |             |      |       |                              |

TOTAL CREDITS \_\_\_\_\_

### 2.1 Second choice courses

| CODE | SECTION | CREDITS | COURSE NAME | DAYS | TIMES | INSTRUCTOR NAME OR SIGNATURE |
|------|---------|---------|-------------|------|-------|------------------------------|
|      |         |         |             |      |       |                              |
|      |         |         |             |      |       |                              |
|      |         |         |             |      |       |                              |
|      |         |         |             |      |       |                              |
|      |         |         |             |      |       |                              |

### 3.0 Declaration

I acknowledge that I have read and agree to the registration procedures and regulations announced with the Timetable to which this course selection relates.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

### 4.0 Financial Services clearance

**PAYMENT: July 15:** Payment for all outstanding debts to hold Fall/Winter course selection must be received in order to **hold Fall/Winter course registration.** All financial transactions must be made in the Office of Finance and Administration, 4<sup>th</sup> floor, Granville Campus. Payments may be submitted by telephone at 902 494 8222, toll free at 1 888 444 5989 or by fax at 902 425 3240.

**PREREQUISITES: It is the student's responsibility to check and ensure that all prerequisites are being met.**