



Request for Course Add (outside home department)

This form with appropriate signature must be returned to the School of Graduate Studies.

Name: student no:
Graduate Program: email:
Student Signature: date:

Graduate course requested

Course Number: term:
Course Name:

I approve the above request to have the student registered in this course.

Course Instructor Signature: date:

Program Approvals

Home Program Director Signature: date:

Host Program Director Signature: date:

Dean Signature: date:

The information on this form is collected under the authority of the Trent University Act, 1963 and is needed to document your request. The information will be used to official record your request and to update your academic record if your change is granted. If you have any questions about the collection, use or disclosure of this information by the University, please contact the University Registrar, Office of the Registrar, Blackburn Hall, 705-748-1215, registrar@trentu.ca