

(PLEASE PRINT)

Family Name _____ First Name _____

Address _____ Concordia I.D. Number _____
(civic number/street) (city) (postal code)

E-mail _____ Cell / Telephone _____
AREA CODE

Department _____ Program of Study _____

Guidelines (please read carefully):

- Check appropriate box(es) and state your reason by attaching a **letter of explanation** to this request.
- **Explanation is required.** Considerations can be given only when specific reasons are provided.
- When referring to a course, state the course number, section and term (i.e. FRAN 211 AA Winter 2018 (term is key for enrolment)).
- Include a current copy of your **unofficial transcript** from your CU account and supporting documents, ie. original medical documentation, notes from your professor(s) indicating attendance and participation for requested courses, course description(s). Failure to do so will delay processing of your request.

Late Section change

I have missed the deadline and I want to change sections in a course for which I have already registered:

| | COURSE NUMBER | TERM/YEAR | SECTION | LAB | TUTORIAL |
|-------------|---------------|-------------|---------|-------|----------|
| <i>i.e.</i> | MATH 201 | WINTER 2018 | AA | | |
| (1) | _____ | _____ | _____ | _____ | _____ |
| (2) | _____ | _____ | _____ | _____ | _____ |
| (3) | _____ | _____ | _____ | _____ | _____ |
| (4) | _____ | _____ | _____ | _____ | _____ |

Check appropriate box(es):

- | | | |
|---------------------------------------------------------------|--------------------------------------------------|------------------------------------------------------|
| <input type="checkbox"/> Change Status From P/T to F/T | <input type="checkbox"/> Waive 24-Credit Rule | <input type="checkbox"/> Waive Residency Requirement |
| <input type="checkbox"/> Late Completion after deadline (INC) | <input type="checkbox"/> Add/Remove Exemption(s) | <input type="checkbox"/> Transfer External Credit(s) |
| <input type="checkbox"/> Extension Late Completion | <input type="checkbox"/> General Education | <input type="checkbox"/> Retain Credit(s) |
| | | <input type="checkbox"/> Other: _____ |

Student Signature: _____ Date: _____

Student Request Checklist:

- Checked appropriate box(es) above Attached a letter of explanation Attached a copy of unofficial transcript Had request signed by a departmental advisor

Please note that requests for a refund (DNE - full or partial) can be found under Course Withdrawal on www.concordia.ca
 Concordia.ca → Students → Course Registration → Course Withdrawal

FOR DEPARTMENTAL ADVISOR'S USE ONLY

Comments: _____

Departmental Advisor's Name (please print): _____

Departmental Advisor's Signature: _____ Date: _____