

Course Retention Request for Returning or Transferring Students

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Student must apply online at www.uvic.ca/application and either upload the completed form to their application, or send it to their Graduate Admissions and Records Advisor

STUDENT NAME:		STUDENT ID:		
ORIGINAL DEPARTMENT AND PROGR	RAM:			
This student is being considered for	return to progr	am reinstatement	transfer to:	
Term this change takes effect:				
NEW DEPARTMENT AND PROGRAM:	CAT	ALOG TERM:		
Indicate courses to be retained/transf	ferred to the ne	w program. All other	courses will be excluded.	
COURSE:		IF REPLACING A CORE REQUIREMENT, SPECIFY WHICH ONE:		
In addition to regular program requirements for this catalog term, will the student be required to complete any additional coursework? E.g.: Grades below B that have not yet been addressed; coursework to apprise the student of new developments in the field since their last registration.				
If the student's program has expired or w	ill expire soon, a	tach a <u>Request for Prog</u>	gram Extension.	
Signatures (Original signatures, electron				
Student's name	Student's signa	ture	Date	
Supervisor's name	Supervisor's sig	nature	Date	
Signature of Graduate Advisor (Only require	red if core courses a	re being replaced or units are	e being waived)	
Graduate Advisor's name	Graduate Advis	or's signature	Date	

The University of Victoria will be collecting your personal information for the purposes of providing educational services. This information is collected under s. 26(c) of the Freedom of Information and Protection of Privacy Act. If you have any questions or concerns about how your personal information is handled please contact privacyinfo@uvic.ca.