APPROVAL TO ENROLL IN A COURSE OFFERED THROUGH ANOTHER UofS CAMPUS

ACAD-HISTORY-T

Please process one course request per form. Print clearly and use ink (no pencil).

Royal ID	Name	
Major/Program and Degree	College ☐ CAS ☐ KSOM ☐ PCPS	Cell Phone #
Expected Date of Graduation ☐ Spring/Summer ☐ Winter	Advisor/Program Director	Student's Campus ☐ Saskatoon ☐ Regina ☐ Distance/Online

Course Information to Request the Course Offered Through Another UofS Campus

Course Subject and Number	Course CRN	Course Credits	Course Campus	Course Term and Part of Term
				☐ Fall ☐ Inters. ☐ Spring ☐ Summer Part of Term: _____ Year: _____

Number of Previously Attempted Courses on an alternate UofS campus: ☐ None ☐ One ☐ Two ☐

(Note: A maximum of 6 credits may be attempted on an alternate campus. No more than 3 credits may be attempted in any single course.)

Subject(s), Number(s) and Credits of Previously Attempted Course(s) : _____

Term Previous Course(s) were Attempted: _____

Reason for Course Registration on Alternate UofS Campus:

Student Signature	Date

For Completion by Program Director

Confirm number of previous credits and courses that have been attempted

Course	Term	Credits	Course	Term	Credits

Approval Signatures	Signature required	Not required	Date
Chairperson/Program Director			
Student's Dean (Dean must verify)			

ORAS Use Only