## **COLLEGE OF EDUCATION**

Undergraduate Programs Office 28 Campus Dr. Saskatoon, SK S7N 0X1 Ph: 306 (966-7654) Fax: 306 (966-7644)

## Permission to take 19-21 credit units

DATE:	STUDENT NUMBER:
NAME:	
ADDRESS:	
POSTAL CODE:	PHONE NUMBER:
EMAIL ADDRESS:	
SIGNATURE	
NUMBER OF CRE	DIT UNITS REQUESTED (Please circle): 19, 20, 21
WHICH TERM? (F	Please circle) Term 1, Term 2, Term 1 & 2
	SS OR CLASSES AND SECTION NUMBERS YOU WISH TO 00.2 02, Geog 202.3 01
STATE REASON W	HY ADDITIONAL CREDITS ARE NEEDED:
then you will be able in a term, you must us Committee.	pproved for the extra credits you will be contacted by email or mail and to register through PAWS. If you are requesting more than 21 credit units se a separate request form to the Student Affairs and Academic Standards
	OR DENIED:
COOKDINATOR O	F UNDERGRADUATE PROGRAMS