

(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 MyConcordia portal 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.

- |   |  |  |   |
|---|--|--|---|
| <input type="checkbox"/> <b>Late Withdrawal (DISC)</b><br>I have missed the deadline and I want to withdraw from the following course(s): | <input type="checkbox"/> <b>Late Section Change</b><br>I have missed the deadline and I want to change sections in a course for which I have already registered: | <input type="checkbox"/> <b>Late Registration</b><br>I have missed the deadline and I want to add the following course(s): | <input type="checkbox"/> <b>Course Repetition</b><br>I want permission to repeat a course I have already taken twice. |
|---|--|--|---|

COURSE NUMBER	TERM/YEAR	SECTION	LAB	TUTORIAL
<i>i.e. MATH 201</i>	<i>WINTER 2018</i>	<i>AA</i>		
(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"/> Credit Overload (please specify semester) | <input type="checkbox"/> Course Substitution     | <input type="checkbox"/> Transfer External Credit(s) |
| <input type="checkbox"/> Late Completion after deadline (INC)      | <input type="checkbox"/> Add/Remove Exemption(s) | <input type="checkbox"/> Retain Credit(s)            |
| <input type="checkbox"/> Extension Late Completion                 | <input type="checkbox"/> General Education       | <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](http://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: \_\_\_\_\_