UNIVERSITY OF TORONTO
FACULTY OF APPLIED SCIENCE & ENGINEERING

Office of the Faculty Registrar
Academic Activity

A. COMPLETE THIS SECTION

SURNAME   GIVEN NAMES

ACADEMIC PERIOD

| | | | | 9 | | | | | | | I | | | | | | 5 |

(FALL SESSION)   (WINTER SESSION)   (SUMMER SESSION)

STUDENT NUMBER

EMAIL ADDRESS

SESSIONAL TELEPHONE NUMBER   BUSINESS TELEPHONE NUMBER

B. ADD

COURSE DESIGNATION	SECT CODE	MEETING SECTION			OFFICE USE ONLY			OFFICE USE ONLY
		LECTURE	PRACTICAL	TUTORIAL	EFFECTIVE DATE			
					YEAR	MONTH	DAY	

C. CANCEL

COURSE DESIGNATION	SECT CODE	OFFICE USE ONLY			OFFICE USE ONLY
		EFFECTIVE DATE			
		YEAR	MONTH	DAY	

D. CHANGE MEETING

COURSE DESIGNATION	SECT CODE	MEETING SECTION CHANGE					OFFICE USE ONLY
		1ST PREFERENCE		2ND PREFERENCE			
		FROM	TO	FROM	TO		

E. COURSE LOAD AND SIGNATURES

(A) BEFORE THIS CHANGE MY COURSE LOAD FOR THIS ACADEMIC PERIOD WAS: ☐ ☐

(B) AFTER THIS CHANGE MY COURSE LOAD FOR THIS ACADEMIC PERIOD IS: ☐ ☐

| STUDENT SIGNATURE | DATE | REGISTRAR |
| | | |

☐ I acknowledge that I have completed the necessary prerequisites for the courses listed above, and that I will be removed at any time if this is not the case.