

Course Request Form

Faculty of Applied Science and Engineering – Department of Mechanical and Industrial Engineering
The University of Toronto respects your privacy. The information on this form is collected pursuant to section 2(14) of the University of Toronto Act, 1971.

Please submit this form to the MIE Undergraduate Office (drop-off: MC 109 or email: undergrad@mie.utoronto.ca)

Students are advised to familiarize themselves with the Sessional Dates found in the APSC Academic Calendar, specifically the last day to add courses and the last day to drop.

NAME (LAST, FIRST): _____
EMAIL: _____
STUDENT NUMBER: _____ **PHONE NUMBER:** _____
PROGRAM: INDUSTRIAL MECHANICAL
YEAR OF STUDY: 2ND 3RD 4TH **SESSION:** FALL WINTER SUMMER

I WISH TO MAKE CHANGES TO THE FOLLOWING COURSES:

Action:		Course Information:				Reason for Request:			
Add/Modify	Drop	Course Code (e.g. MIE231H1F)	Lecture Section (e.g. L0101)	Lab Section (e.g. P0105)	Tutorial Section (e.g. T0104)	Failed	Part-time Student	Transfer Credit	Other (Please Describe Below)
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If Other: _____

STUDENT SIGNATURE: _____ **DATE:** _____
AUTHORIZED BY: _____ **DATE:** _____

Internal Use Only

Academic Status: _____ Processed on ROSI _____
 Notes: _____ Student has been notified _____

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If you have any questions, please refer to www.utoronto.ca/privacy or contact the University's Freedom of Information and Protection of Privacy Office; room 201, McMurrich Bldg., 12 Queen's Park Crescent, Toronto, On M5S 1A1, Tel: 416-946-5835