

## Request for Reading and/or Research Course

Sections 1, 2, and 3 of this form are to be completed by both the student and instructor.

## Section 1: Student Information

| Name:                                 | Student Number:  |                  |               |
|---------------------------------------|------------------|------------------|---------------|
| Degree:                               | Graduate Unit:   |                  | U of T Email: |
| Section 2: Course Information         |                  |                  |               |
| Course Number:                        | Cour             | se Title:        |               |
| Graduate Unit Where Course Offered:   |                  |                  |               |
| Course Description: MEng Proj         | ect              |                  |               |
| Session Course Offered:               | Instru           | Instructor Name: |               |
| Section 3: Information Required In Su | pport of Request |                  | Date Due      |

| Work Required for Course  | Weight in Total Grade | Date Due |  |  |  |
|---|-----------------------|----------|--|--|--|
|   |                       |          |  |  |  |
|   |                       |          |  |  |  |
|   |                       |          |  |  |  |
|   |                       |          |  |  |  |
| Indicate arrangement/frequency of meetings between instructor and student:              |                       |          |  |  |  |
| Reason for Requesting Reading Course (check one):                                       |                       |          |  |  |  |
| Lack of other courses. Special interest related to research or field projects.          |                       |          |  |  |  |
| Regular course is full. Other (specify):  |                       |          |  |  |  |
| List any Reading and/or Research course(s) previously taken in the same degree program: |                       |          |  |  |  |
|   |                       |          |  |  |  |
| Student's Signature:  |                       | Date:    |  |  |  |
| Instructor's Signature:   | Graduate Unit:        | Date:    |  |  |  |

## Section 4: Chair/Director/Graduate Coordinator Approval

| *I approve this Reading and/or Research Course.                       |                         |                           |  |  |  |
|---|-------------------------|---------------------------|--|--|--|
| Home Chair/Coordinator*:  | Graduate Unit:          | Date:                     |  |  |  |
| (sign and print name)   |                         |                           |  |  |  |
| Other Graduate Unit Chair/Coordinator*:                               | Graduate Unit:          | Date:                     |  |  |  |
| (sign and print name)   |                         |                           |  |  |  |
| ROSI Updated (note, when checked, course add/drop form is not require | d). Yes, Course Added o | Yes, Course Added on ROSI |  |  |  |
| Graduate Administrator's Initials:                                    |                         |                           |  |  |  |
|   |                         |                           |  |  |  |

Freedom of Information and Protection of Privacy Act: www.rosi.utoronto.ca/fippa.php