



(Revised :June 2017)

Section A: This section to be completed by the student and presented to the instructor and Psychology Graduate Office for approval. Registration must be completed NO LATER THAN THE FINAL DATE FOR REGISTRATION.

NOTE: This is not a registration form. Students must register through Aurora Student.

Name: _____ (Last Name, Given Name) (email address)

Student Number: _____ Faculty/Department: _____

Regular Session 20__ - 20__ [] Fall term [] Winter term

Course Number: PSYC _____ CRN: _____

Course Title: _____

Section B: This section to be completed by instructor and Psychology Graduate Office no later than the final date for registration and changes in the respective term. Consult the appropriate Academic Schedule for specific dates.

The Psychology Graduate Office authorizes registration for the above noted student in the above noted course as follows:

[] Notwithstanding the lack of appropriate prerequisite

[] Permission to audit course

[] Permission to register

Signed: _____ (Instructor)

Date: _____

Signed: _____ Associate Head Graduate or designate

Date: _____