

## Request to Take a Course in Another Graduate Program at York

Submit completed form to your graduate program office. Schulich course requests must be submitted at Student Services, Schulich School of Business.

Student information						
Surname		Given name(s)				
Student number		E-mail				
Program		Degree & level of study		Current sta		ent status
Course Requested Must be required to complete degree requirements.						
Course number & credit e.g., POLS 5742.6	Course title			Term e.g.,		Catalogue number e.g., cat #Z97F05
Course Director Approval						
Name			Signature			Date (mm/dd/yyyy)
Student signature		Date (mm/dd/yyyy)				
Approvals						
Home Graduate Program Director Name		Signature		Date (mm/dd/yyyy)		
Guest Graduate Program Director Name		Signature		Date (mm/dd/yyyy)		
Valid From (mm/dd/yyyy):		Expires (mm/dd/yyyy):				

**Privacy:** Personal information in connection with this form is collected under the authority of *The York University Act*, 1965 and will be used for educational, administrative and statistical purposes. If you have any questions about the collection, use and disclosure of personal information by York University, please contact: Faculty of Graduate Studies, 230 York Lanes, (416) 736-2100 x 55521.