

Course Approval Request Form for Graduate Students

This form is required for courses taken outside the degree institute or as an exchange student. Courses taken outside the graduate program will not normally count towards the degree requirements unless approved using this form. Consult the graduate calendar (or your research supervisor/program advisor) for general rules and restrictions. **Request for exceptions must be made using this form prior to the beginning of the term.** This request should include a justification and must be signed by the thesis supervisor or program advisor prior to submission to the graduate office.

Please return the completed form to the Graduate Administrator in room ME 3452 or email it to CEEGradInfo@cunet.carleton.ca. Please attach a copy of your current academic audit

Student Information	
Date:	
Student name:	Student Number:
Program: <input type="checkbox"/> Building Engineering <input type="checkbox"/> Civil Engineering <input type="checkbox"/> Environmental Engineering	
Degree: <input type="checkbox"/> M.Eng. Coursework <input type="checkbox"/> M.Eng. Project <input type="checkbox"/> M.A.Sc. <input type="checkbox"/> PhD	
Student Signature:	Date:
Course Information	
Registration term:	
Course subject/number:	
Course Title:	
Course Calendar Description: (additional information may be attached)	
Reason for taking the course:	
Supervisor/Advisor Name:	
Request recommended: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Signature:	Date:
Institutional approval	
<input type="checkbox"/> Building Engineering <input type="checkbox"/> OCICE (Civil Engineering) <input type="checkbox"/> OCIENE (Environmental Engineering)	
Request Recommended: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Comments:	
Director/Associate Director Name:	
Signature:	Date:
Departmental Office Use Only	
Note: General condition applies. Approved courses can count towards degree requirements only if the final grade is B- or higher.	
<input type="checkbox"/> Approved <input type="checkbox"/> Denied	
Comments:	
Authorized Departmental Name:	
Signature:	Date: