Carleton University | Institute of Interdisciplinary Studies

COURSE PERMISSION FORM
Please return completed form and attachment to the Graduate Programs Administrator and Graduate Advisor.

WHEN TO USE THIS FORM
Use this form **ONLY** if the course you want to take for credit is:

1. **NOT** on the approved list of graduate courses indicated in the Graduate Calendar.
2. For any undergraduate course **NOT** specifically listed on *your "Statement of Standing on Admission"* as part of your program requirements.

THE PROCESS:

1. Complete the form below
2. Attach a course description (Calendar description is acceptable)
3. Return completed, signed form to the Graduate Programs Administrator and Graduate Advisor via email
4. Graduate Advisor will review request and inform student of decision
5. Approved forms will be kept on file for graduation purposes

Date of Request _____

Student Information

Name: _____Student # : _____

Email Address: _____ Telephone # : _____

PERMISSION FOR CREDIT requested for:

_____
Course Number and Title

REASON(S) for wanting to register in this course. Please be *specific* as to how this course will contribute to your thesis work or overall program success. Attach a description of the course if not listed in the Carleton Graduate Calendar.

Student's Signature: _____

PERMISSION FOR CREDIT
FOR IIS OFFICE USE ONLY
Approval of Graduate Advisor: _____
Reason if not approved: _____