



Check **only one** of the following semesters:

- Summer
- Fall
- Winter

Year: \_\_\_\_\_ (i.e., 2023)

Note: Email the completed form to [es@uoguelph.ca](mailto:es@uoguelph.ca). Exception: For Late Add UNIV\*7510/7520, email [OGPS - Records](#).

**A. General Information**

ID Number: \_\_\_\_\_

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

**B. Course Information**

Add       Drop

UNIV\*7510 Active F/T Registration     UNIV\*7520 Active P/T Registration     Course     Audit

**Note: If you are looking to switch between Full-Time and Part-Time, a separate [application/form](#) is required.**

If adding UNIV\*7510/7520 in the Late Add Period:

1. Email the completed form to [OGPS - Records](#)
2. Connect with Student Financial Services regarding your term payment

Course: (e.g., CIS) \_\_\_\_\_ Code: (e.g., 6000) \_\_\_\_\_ Section: (e.g., 0104) \_\_\_\_\_

Course Title: \_\_\_\_\_

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## INSTRUCTOR'S ACKNOWLEDGEMENT

Based on our discussions I, the instructor undersigned, acknowledge that the student may not have the specified requirements. By way of my signature I am waiving them.

### Course Prerequisite or Corequisite Waiver

Signing this box will override the prerequisite or corequisite requirement.

### Course Restriction Waiver

A rule that restricts access to the course based on Student Program or previous credits. Signing this box will override this rule.

### Instructor Consent

Instructor consent is **required** if taking undergraduate courses, courses for audit (AU), distance education courses (DE) or courses designated as "instructor consent required."

Instructor's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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### Program Coordinator signature required for:

1. Credit Overload Waiver (beyond 4.00 credits, full-time students only)
2. New Student Late Add

Form will not be processed without signature.

Program Coordinator Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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### Section Overload Waiver

Course Section is at capacity. Signing this box will override the section capacity.

Instructor's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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### Late Add

Required for adding courses beyond the last day of the Add period for the current semester.

Instructor's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

OGPS Approval (Late Add): \_\_\_\_\_

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### **C. Student's Acknowledgement**

I acknowledge that the information on this form is correct and that I have selected courses in accordance with procedures outlined in the Graduate calendar. I also agree to abide by the statement on the Student's Rights and Responsibilities and Academic Responsibilities as described in the Graduate Calendar.

Student's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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### **FOR OFFICE USE ONLY**

Date of Receipt: \_\_\_\_\_

Received By: \_\_\_\_\_