

The College of Graduate Studies
Okanagan Campus
EME2121
Tel: 250.807.8772

Email: gradask.ok@ubc.ca

Registration/Audit Form

Use this form if you are unable to register yourself in a course.

Student Name:						Student #:				
Phone:					Emai	Email:				
Program:					Date	Date:				
Course Section Add										
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Comments:										
Approval										
Student's Supervisor Name:				Student's Supervisor Signature:				Date:		
Student's Program Coordinator Name:				Student's Program Coordinator Signature:			Date:			
College of Graduate Studies Name: College					ollege of Graduate Studies Signature:					
								Date:		
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lote: The department head's signature is required If you are requesting to register/audit a course in Computer Science, Data cience, Math, Physics, or Statistics.										
Department Head Name:			Department Head Signature:				Date:			