

## Undergraduate Course Approval

Revised Sept 2012

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Student			Date of Birth	DD/MM/YYYY							
Last Name			Telephone		-			_			
First Name		E-mail (required)	d) @unbc.ca						bc.ca		
regularly for ar Refer to the UI The most up-to	esponsible for monitor ny changes or updates NBC Calendar ( <u>www.u</u> o-date information rega	ing the status of courses fo inbc.ca/calendar/) for imporarding class schedules, inc aints, or insufficient registra	rtant dates, registration Iuding course availabil	n deadlines, i ity, is online a	egulatior at <u>www.u</u>	ns, and nbc.ca/	policies courses	s. <u>s/</u> . Cours	ses may		
YEAR & SEMES  September (		uary (Jan-Apr) 🔲 May	(May-Aug) <b>Year:</b>								
INSTRUCTOR APPROVAL											
		(3 <sup>rd</sup> & 4 <sup>th</sup> year, etc)	☐ Pre-re	quisite / Co	o-requis	site					
CRN (ie: 50101)			Instructor's Signature				Date			Office e Only	
		th Instructors must sig	gn)								
CRN (ie: 50101)	Course Subject & Number (ie: ANTH 101)	Instructors' Name	es	Instructors'	Signature	s		Date	e	-	Office e Only
		PROGR/	AM CHAIR APP	ROVAL							
☐ Prerequi	site/Co-requisite	☐ Major Restriction	☐ Exceed Repea	t Count 🛚	Other						
CRN (ie: 50101)	Course Subject & Number (ie: ANTH 101)	Program Chair's Na	-	ogram Chair's		e		Date			e Use

SPECIAL COURSE APPROVAL												
<ul> <li>□ Directed Reading/Independent Study (Outline required)</li> <li>□ Special Topics (Outline required)</li> <li>□ Internship (Outline required)</li> </ul>												
*Please Note: For courses that run for more than one semester, the credit hours, tuition and fees are all registered and due in the first semester.												
Course Subject & (ie: ANTH 10			Course Dates – DDMMYY Course Title (This title will appear on t									
		START END			Office Use Only							
Instructor's Name		Instructor's Signature	Program Chair's Signature	Date								
*Please Note: Dean's permission is required if forms being submitted after the semester's published add/drop date.												
Dean's Name		Dean	Date									
CAMPUS OF STUDY  Prince George Quesnel Fort St. John Prince Rupert Terrace Wilp Wilxo'oskwhl Nisga'a Other												
DEAN APPROVAL												
☐ Permission		•	te Regulations:V.5; please include	rationale for request	t)							
CRN Course Subject & Number (ie: 50101) (ie: ANTH 101)		& Dean's Name	Dean's Signature	Date	Office Use Only							
BC Freedom of Info to internal administr research and plann Canada Statistics A	rmation and Pro ative uses relate ing. Certain stu lct, and to the Bo te confidentiality	ection of Privacy Act, and with the pode to student admission, registration a dent information is provided on a code Government. The internal use of student information.  ove statement.	rration form, and other information placed plicies and procedures of the University of and status, student information may also be infidential basis to Partner Institutions, to student records, and the obligatory reporting	f Northern British Columb e used in strict confidence Statistics Canada as go	ia. In addition e in University verned by the							
		0	ignature of otddent	Date								
	Date Receiv	Date Received										