University of Regina

Paul J. Hill School of Business

ADVANCE/SPECIAL PERMISSION FORM

Last Name	First Name	Middle Initial

Student ID Number

CRN	Subject	Course Number	Section

TERM FOR PERMISSION	YEAR	TERM
		Fall
		Winter
		Spring

You are encouraged to request permission in advance of your registration day and time. Permission, if granted, can be viewed in UR Self-Service. Submit completed forms to the Business Administration General Office - Ed 517.

1. Permission to enroll in more than max hrs in current semester *(Students who have successfully completed 30 credit hours, have a PGPA over 75%, and have taken full course loads)*

Reason for request:

Approved: YES_____ NO_____

MAXHRS

Date Signed _____ Program Advisor's Signature _____

2. Permission to register for a course that has already been completed or attempted

Reason for request:

Approved: YES_____ NO_____

REPEATLMT

Date Signed _____ Program Advisor's Signature _____

3. Permission to register without the pre-requisite *(Permission from other U of R Faculties/Departments based on acquired knowledge. Exceptional cases in BUS when a pre-requisite is under review.)*

Reason for request:

Approved: YES_____ NO_____

PREREQ

Date Signed _____ Program Advisor's Signature _____

4. Permission to register in a restricted course

Reason for request:

Approved: YES_____ NO_____

DEGREE

COLLEGE

CAMPUS

Date Signed _____ Program Advisor's Signature _____

5. Permission to register late - after the final add date

Reason for request:

Has the student been attending the class: *YES* ____ *NO* _____

You will allow late registration for this student: *YES* ____ *NO* _____

Approved: YES_____ NO_____

Instructor's Signature _____ Date Signed _____ Program Advisor's Signature _____

I am aware that:
- Permission is not automatic.
- Receipt of permission does not guarantee that space is available in the section or course.
- It is my responsibility to meet the prerequisites of courses and to comply with academic regulations.
- It is my responsibility to ensure the accuracy of my registration.

Student Signature _____ Date: _____

Student Email:	Student will be contacted using email provided regarding decision on request.

Banner Entry:	Initials:	Date: