ENGINEERING PERMISSION FORM

PLEASE INDICATE THE APPLICABLE SESSION:
☐ Fall/Winter
☐ Spring/Summer

STUDENT NAME: _________________________________          STUDENT NUMBER: _______________
EMAIL ADDRESS: _________________________________

☐ Course Prerequisite Waiver
This approval is required if you do not have the academic requirements to register for a course. Course prerequisites are found in the Course Section of the Undergraduate Calendar.

Course: _______________________________
Instructor Name: _______________________________ Signature: _______________________________
(Please Print)
Date: _______________________________

☐ Required Permission
This approval is required if the course for which you wish to register requires permission of the department.

Course: _______________________________ If required:
Term: _______    ☐ Day ☐ Evening
Section: _______
Name: _______________________________
Signature: _______________________________
(Please Print)
Date: _______________________________

☐ Program Unit Overload
Request to overload above the required maximum units (as listed in the undergraduate calendar).

Total number of unit(s) overload: _______
Number of units required above 21 units for:
Term 1: _______
Term 2: _______
Name: _______________________________
Signature: _______________________________
(Please Print)
Date: _______________________________

FIPPA notice
The information gathered on this form is collected under the authority of McMaster University Act, 1976. The information is used for the academic, administrative, financial and statistical purposes of the University including, but not limited to, admissions; registration; and maintaining records; awards and scholarships; convocation; provision of student services, including access to information systems; alumni; and disclosure to or on behalf of the applicable McMaster Student government. This information is protected and being collected under section 39 (2) and section 42 of the Freedom of Information and Protection of Privacy Act of Ontario. Questions regarding the collection or use of this personal information should be directed to the University Registrar, University Hall 209, McMaster University, 905-525-9140.