

CHANGE OF COURSE REGISTRATION



Office of the Registrar

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It is your responsibility to ensure that this form is received by the Office of the Registrar. You need to be aware that financial and/or academic penalties may be assessed.

FOR OFFICE USE ONLY	
DATE ENTERED	ENTERED BY

FIRST NAME (LEGAL)		LAST NAME (LEGAL)	
STUDENT ID#	PROGRAM	PLEASE CHOOSE TERM: <input type="radio"/> Fall (Sept-Dec) <input type="radio"/> Winter (Jan-Apr) <input type="radio"/> Spring (May-Aug) <input type="radio"/> Summer (July-Aug)	

ADD COURSES (in this section)

CLASS NUMBER (e.g. 12345)	SUBJECT (e.g. ENGL)	CATALOGUE # (e.g. 2550)	SECTION (e.g. A01)	PREFERRED START DATE (If applicable)

DROP COURSES (in this section)

CLASS NUMBER (e.g. 12345)	SUBJECT (e.g. ENGL)	CATALOGUE # (e.g. 2550)	SECTION (e.g. A01)	<p>If dropping courses reduces your credits to less than full-time status, your student loan or grant may be cancelled.</p> <p>Please consult with an Advisor prior to changing your registration.</p>

FREEDOM OF INFORMATION & PROTECTION OF PRIVACY (FOIP) NOTIFICATION STATEMENT

The personal information requested on this form is collected under the authority of section 65 of the *Post-secondary Learning Act* and section 33(c) of Alberta's *Freedom of Information and Privacy Act* and will be used for the purpose of registration. For information about the collection and use of this information, contact the Office of the Registrar at 10215-108 Street NW, Edmonton, AB, T5J 1L6, Tel. 780.644.6000.

STUDENT ACKNOWLEDGEMENT AND SIGNATURE

By the act of signing this form, each student agrees to be bound by the policies and procedures of the College

STUDENT SIGNATURE	DATE
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