



# UNIVERSITY OF SASKATCHEWAN

## COLLEGE OF EDUCATION

Undergraduate Programs Office  
3350 - 28 Campus Dr. Saskatoon, SK S7N 0X1  
Ph: 306 (966-7654) Fax: 306 (966-7644)

### PERMISSION REQUEST FORM FOR NON-SUNTEP STUDENT TO REGISTER IN "G" COURSE(S)

I \_\_\_\_\_, \_\_\_\_\_  
Student Name Student Number

apply for permission to register in \_\_\_\_\_  
Course Name/Number Section number CRN number

through SUNTEP (Prince Albert or Saskatoon) during 20\_\_\_\_ Regular or Spring/Summer Session.

I have the prerequisite(s) to take the above named course(s).

Email Address: \_\_\_\_\_ Student Phone Number: \_\_\_\_\_

\_\_\_\_\_  
Student Signature Date

\_\_\_\_\_  
Student Address, including postal code

Approval: \_\_\_\_\_  
SUNTEP DATE

\_\_\_\_\_  
EDUCATION DATE

\*\*\*\*\*

SUNTEP WILL FORWARD THIS FORM TO THE COLLEGE OF EDUCATION FOR FINAL APPROVAL.  
IF THE FEES ARE ATTACHED OR IF THEY HAVE BEEN AUTHORIZED THE COLLEGE WILL  
FORWARD A COPY TO THE FOLLOWING:

Student  
Student File  
SUNTEP  
Donna Scott - SESD