

REQUEST FOR COURSE LOAD WAIVER

The normal course load in any semester is fifteen to eighteen credit hours, and in any session, six credit hours. Should you wish to register for more than the normal course load, and should your academic program not require you to register in more than the normal load you must obtain the written permission of the Dean of your faculty/school. This permission must be processed by the Registrar's Office before the registration systems will permit you to register in more than the normal course load.

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Year	Sem	Student Number	Last Name, Giv	ven Names	
Sem: Fall – F, Winter – W, Spring – S MUN Email address:					
Reaso	on for red	quest			
				_	
				_	
Academic term students: indicate the number of the extra course being added:					
Cours	e Numb	er:			
Work	Term s	tudents: list all courses t	o be taken in addition	to the work term:	
Course Number: Course Number:					
As this student's work term supervisor, I understand the impact that taking academic course(s) during					
this work term may have on the student's assigned work and I support this request.					
Employer signature:					
Zimpleyer eignature.					
ASM-CE signature:					
Click "Submit Form" to send the form electronically.					
			Submit Form		
			Submit Form		
If you do not have an email client on your system, or your web browser can't connect to the email client, the "Submit Form" will not work. In this case, save the file on your computer and then attach it to an e-mail and send it to: engr@mun.ca					
				se save the file after entering your response	
	ile > Prii it on a PC		you use the default save	e settings, your entries will be invisible to	
OFFICI	E USE O	NI Y			
			total number of credit by	ours for which this student may register in each	
		n indicated:	total number of credit no	outs for which this student may register in each	
Fall Sei	mester _	Spring S	Semester	Winter Semester	
0:	(D		۸.	Date	
Signatu	ire of Del	partment Head (if applicable):	Date:	
Signatu	Signature of Director for Co-op (if applicable): Date:				
Signature of Associate Dean:				Date:	