



: 571 @HMC: ; F581 5H9'GHI 8-9G  
 )\$\$; `Ybf]X[ Y5j Ybi Y  
 GH7 UA Uf]bYgZCB` @G' 5%  
 HY: "- \$)!\*, ,!) ) \$  
 : U: "- \$)!\*, ,!\$(, ,  
 K YvghY: [kkk'VfcWi 'WUk fUXi Uh!gli XIYg](#)

**5DD@7 5HCB: CF BCB!89; F99; F581 5H9 'f7 CI FG9#GL  
 F9; -GHF5 HCB**

Please confer with the Course Instructor and Graduate Program Director regarding course availability. The following completed and signed application form must be submitted to the Faculty of Graduate Studies before the beginning of each term. Registration preference will be given to Brock Graduate students.

Brock Student number (if previously attended Brock University):													
Last Name					First Name								
Street			Apt. No.		City:								
Province/State:		Country:		Postal Code:		Social Insurance Number:							
Telephone Number:				Business Telephone Number:									
Date of Birth: (Month/Day/Year)				Email Address									
<input type="checkbox"/> Born in Canada or Canadian Citizen <input type="checkbox"/> Permanent Resident (Landed Immigrant)		<input type="checkbox"/> Student Visa <input type="checkbox"/> Other Visa		Date of Entry _____									
BUa Y'cZ-bghji h'cb UbX @WUjcb				DcghGYVt bXUf m-bghji h'cbg UHfYbXYX. 'fl]gh]b' cfXYf' cZ' UHghUHfYbXUbWZ				8 Y[ fYYcf 7 YfHqWUW'CVUJbYX'				MYUF	
								From:					
								To:					
								From:					
								To:					

Please list the courses you wish to register in for the term:  5 @@  K -BH9F'  GDF-B; .....  GI AA9F TA 9XL

**9I Ua d`Y.**

57589A≠ M95F				GI 6>97H				7CI FG9'BC"				G9GG-CB T			8I F		G97		
&	\$	\$	*	6	=	C	@	)	D	&	\$	:	K	GD	GI	\$	&	\$	%

Is this course(s) to be AUDITED?:  YES  NO

: 99.

The current non-degree graduate student course fee can be found at: [\ltd.#k k k 'VfcWi 'WUk YVWU# fUXi Uh# 99G\ ha`](#) Section III: Other Fees. Once course(s) has been approved, you will be notified via email. Payment is to be made in the Finance Department, 12<sup>th</sup> Floor, Schmon Tower.

Your signature on this form is confirmation of registration for the course(s) included above and certifies that all information is correct.

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

Brock Course Instructor: \_\_\_\_\_ Date: \_\_\_\_\_

Brock Graduate Program Director: \_\_\_\_\_ Date: \_\_\_\_\_

Graduate Studies Approval: \_\_\_\_\_ Date: \_\_\_\_\_

: CF C: : =79'1 G9.

D89AC'  @G9;  GDF958 G<99H'  F9; -GH9F .....  -B5 B79'  GHI 89BH'BCH= 98'  ; F589