Application for Registration in a Graduate Course (Non-Degree Student Status)

Faculty of Graduate Studies and Postdoctoral Affairs
T: 905-688-5550 x4490
E: graduatestudies@brocku.ca

This form may be used by those wishing to take a graduate course as a non-degree student for personal interest, professional certification, improving academic standing, etc. The form is not intended for those already enrolled in a graduate degree or diploma.

The completed form, including Graduate Program Director signature, **along with proof of undergrad degree completion** should be submitted to the Faculty of Graduate Studies and Postdoctoral Affairs at graduatestudies@brocku.ca.

The current Graduate Non-Degree Fee is linked from our Graduate Tuition and Fees page – click on the 'View Other Graduate Program Related Fees' button. Once course registration has been approved, you will be notified via email with login details for the Brock Portal and instructions on paying your fees.

Applicant Information			
Student ID number (if previously attended Brock University):			
Last name:	First Name:		Date of Birth (MM/DD/YYYY):
Street Address:			City:
Province/State:	Country:		Post Code:
Telephone:	Email:		
Status in Canada (choose one):			
☐ Canadian Citizen	☐ Permanent Resident Date of Entry: Country of Citizenship:	☐ Student Visa Date of Entry: Country of Citizenship:	☐ Other Visa Date of Entry: Country of Citizenship:

Post-Secondary Institutions Attended (please list in order of most recent attendance)			
Institution Name and Location	**Program**	**Qualification Obtained**	**Year**
			From: To:
			From: To:

Graduate Course Selection(s) For course information, please refer to the Graduate Calendar. For course availability, refer to the academic timetable and confer with the Instructor / Graduate Program Director.

	Year	**Term**			**Subject Code**	**Course Code**	**Duration**	**Section**
Example:	2025	☐ Spring	☑ Fall	☐ Winter	BIOL	5P20	02	01
Course Selection 1		☐ Spring	☐ Fall	☐ Winter				
Course Selection 2		☐ Spring	☐ Fall	☐ Winter				
Is this course to be audited?			☐ Yes	☐ No				

Approvals and Signatures Student signature below confirms your request to register in the courses above and that all information is correct.	
Student Signature:	Date:
Brock Course Instructor Signature:	Date:
Brock Graduate Program Director Signature:	Date:
Brock Graduate Studies Signature:	Date: