

Special Student Permission Form

Last Name: _____ First Name: _____

Phone Number: _____ Email: _____

Course(s) I wish to take as a Special Student are offered by the following program:

Course Permission

I wish to take the following course(s) as a Special Student at Toronto Metropolitan University:

Course(s)	Course Number and Name
Course 1	
Course 2	

I wish to take the above courses in the following semester: Fall/Winter/Spring (Circle one) _____ (Year)

Instructions:

Complete Section A and submit a copy of this Special Student Permission Form with the required signature, rationale and Letter of Permission (if applicable) to the appropriate Program Director. If you have already received a Special Student Offer of Admission from a previous term, you may proceed to visit the program department of the course(s) listed above during the enrollment period to enroll. If you have not already received a Special Student Offer of Admission, you must complete the web-based TMU Application, and upload a copy of the Permission form (complete with the Program Director's authorization) through your Choose TMU Applicant portal page. For detailed instructions on how to upload your documents visit the following [website](#).

To enroll in courses, the student must visit the appropriate program department during the enrollment period after the Special Student Offer of Admission is received. Special Student status does not require renewal each semester unless the student does not enroll in any courses for six consecutive semesters, however, all Special Students must obtain written permission (i.e. this form) to enroll in courses. Self-enrollment is not possible for Special Students. You must bring a copy of this permission form to the program office when you enroll. Course enrollment is subject to space availability.

SECTION A (to be completed by the student)

I have read the above and understand that no guarantees for course enrollment are given to me through the issuing of this permission. I also understand that I have only been given permission to take the courses specified on this permission form.

Name:

Signature:

Date:

SECTION B (to be completed by the Program Director)

The above student is authorized to register as a Special Student in the above courses for the following semester(s):

Name:

Signature:

Date: