## University of Victoria Office of the Registrar

## **UNDERGRADUATE PRO FORMA COURSE REGISTRATION FORM**

(For Directed Studies Courses or Individually Supervised Studies)

 $\hfill\square$  New Form  $\hfill\square$  Revised Form (highlight the change)

Student Name:									Student Number:								Date:						
Student Faculty:									Student Signature:														
Course Info	rmatic	on:																					
Course Course Subject Code Number CRN (office use					only) Course Title (as				per Calendar)									Unit Valu		е	Term		
Section Top	ic Titl	e (Abbrev	∕iate 1	to <b>30</b> (	chara	cters):	Pleas	e print l	egibly				•		•	•							
Texts / Eval		ı Technic	que	(includ	ding p	percen'	tage va	alue for	each (	compone	ent):					√eigh	nt (%)		Date	e Due	e (DD-M	MON-YY	(YYY)
Course Sectified the term and g						our dur	ing on	e of the	follow	ving time	s with	the ur	ndersta	anding	that a	all co	ourse	work	will b	oe con	nplete	d by t	he end
20 Win	ter Se	Session Terms								20 \$	Summ	er Se	essio	n Ter	ms (	See A	caden	nic Ca	alenda	ır for Te	erm Da	ites)	
□ Sep – Dec □ Jan - Apr □ Sep – Apr (Year Long)								□ May-	Aug (	Full 7				May	/ <b>-</b> Ju				☐ Jul - Aug				
□ Non-Standard Dates:									☐ May ☐ Jun ☐ Jul ☐ Aug ☐ Non-Standard Dates:														
Approvals:																							
Supervisor Name (P						Pleas	(Please Print)						s	Signature						Date Approved			
Instructor 1	V					-			-							-							
Instructor 2																							
Supervising		tor/Chair	r																				
Advisor (If I																							
Dean Of St	udent'	s Faculty	/																				