



OFFICE OF THE REGISTRAR

223 MAIN STREET, OTTAWA (ONTARIO) CANADA K1S 1C4

ustpaul.ca

ENROLMENT / MODIFICATION OF ENROLMENT

NON-DEGREE STUDENT AND AUDITOR

- · Before completing this form, carefully read the regulations pertaining to the non-degree student or auditor categories.
- Do not write in shaded areas.
- The term "credit" is replaced by "unit" in English texts only, except in expressions such as "credit transfer" or "advanced standing credit" that are commonly used throughout Ontario universities.
- Notice of Collection of Personal Information: Your personal information is collected under Saint Paul University Policy ADM-11 8 Access to
 Information and Protection of Privacy, in compliance with the Ontario Freedom of Information and Protection of Privacy Act. If you have any
 further questions, please con tact the Secretary General at sec_gen@ustpaul.ca.

NOTE: In this document, masculine pronouns are used when no gender indicated.

TRIMESTRE			
FALL WINTER SPRING/SUMMER	YEAR	HAVE YOU EVER SUBMITTED AN ADMISSION APPLICATION OR STUDIED EITHER AT SAINT PAUL	
LAST NAME		UNIVERSITY OR THE UNIVERSITY OF OTTAWA?	
		(BOTH UNIVERSITIES USE THE SAME STUDENT NUMBER.)	
FIRST NAME	MIDDLE NAME	YES NO	
SEX		IF YES, PLEASE PROVIDE YOUR STUDENT NUMBER:	
MALE FEMALE OTHER (SPECIFY)			
DATE OF BIRTH			
FIRST LANGUAGE ENGLISH FRENCH	LANGUAGE OF CORRESPONDENCE	IN WHICH LANGUAGE WOULD YOU LIKE TO STUDY?	
OTHER (SPECIFY)	OTHER (SPECIFY)	ENGLISH FRENCH	
STATUS IN CANADA COUNTRY OF BIRTH		TH IS OTHER THAN CANADA, WHAT WILL DA AT THE TIME OF ENROLMENT? ROOF REQUIRED)	
	PERMANENT RESIDEN		
COUNTRY OF CITIZENSHIP		DIPLOMAT (PROOF REQUIRED)	
		VENTION (PROOF REQUIRED)	
	STUDENT PERMIT	DED)	
	OTHER (PROOF REQUI	KEU)	

NOTE: ENROLMENT CANNOT BE CONFIRMED UNLESS PROOF OF LEGAL STATUS HAS BEEN PROVIDED TO THE OFFICE OF THE REGISTRAR. PLEASE SEND YOUR PROOF OF LEGAL STATUS BY EMAIL TO **REGISTRAR@USTPAUL.CA**.

PERMANENT ADDRESS		MAILING ADDRESS (IF I	DIFFERENT FROM PERMANENT A	ADDRESS)
NO. AND STREET	APT.	NO. AND STREET	APT.	
CITY	PROVINCE	CITY	PROVI	NCE
COUNTRY	POSTAL CODE	COUNTRY	POSTAL CODE	
PHONE NO. MO	OBILE NO.	CONTACT IN CASE OF E	MERGENCY: NAME	
EMAIL		PHONE NO.	EMAIL	
UNDERGRADUATE	present enrolment reques PROFESSIONAL CERTIF MICROPROGRAM in: TRANSFER OF UNITS: Prinstitution. UPGRADING: Individuals GIFTED STUDENT: Maxim present enrolment reques IMPROVING ACADEMIC faculty, or under recomme cumulative total of 30 uni AUDITOR: Person who ha	t. ICATION: Include a justification rovide a letter of permission or a holding a recognized college or num of 3 units per term and a cu t. Provide a written recommende STANDING: Applicable to stude endation of the Admissions Office ts, including the present enrolment	formal written agreement from youniversity degree. Provide proof of imulative maximum of 6 units inclustion from your high school. Ints who have been withdrawn from the Maximum of 12 units per term are ant request. If aculties to take one or more cour	our home f degree. Iding the In their India
GRADUATE INCLUDE A TRANSCRIPT. ALL REQUESTS MUST BE AUTHORIZED BY THE ACADEMIC UNIT.	AUDITOR: Person who has earning units. Auditors are OTHER GRADUATE NON-	MICROPROGRAM in: Maximum of 6 units per term and a cumulative maximum of 9 units including the present enrolment request. AUDITOR: Person who has been authorized by one of the faculties to take one or more courses without earning units. Auditors are not entitled to write examinations, nor to hand in assignments. OTHER GRADUATE NON-DEGREE STUDENT: Maximum of 6 units per term and a cumulative maximum of 9 units including the present enrolment request.		
COURSE SELECTION (E	NROLMENT IN COURSES IS	NOT OFFICIAL UNTIL APP	ROVED BY THE UNIVERSITY;)
COURSE TO ADD COURSE CODE LETTERS - NUMBERS SECTION ABC 1234 A00	AUTHORIZATION AND/OR CO	MMENTS Any uni Univers of my ir deadlin academ	I agree to pay the fees arising from this enrolment. Any unpaid fees will be owed to Saint Paul University unless I inform the University IN WRITING of my intent to cancel my enrolment prior to the deadline for full refund as specified under the academic dates and deadlines found in the sessional calendar on the University website.	
COURSE TO WITHDRAW FROM COURSE CODE LETTERS - NUMBERS SECTION ABC 1234 A00	AUTHORIZATION AND/OR CO	directiv or audit is true a of citize declara of my e of Saint DATE	ead and understood the regulation es pertaining to non-degree studer ors. I certify that the above inform and complete, including my declarationship and status in Canada. Any fation on my part will result in the canrolment. I agree to abide by all result University.	nts and/ ation ation alse ncellation