Access to Information and Protection of Privacy - The information on this form is collected under the authority of the *Memorial University Act (RSNL 1990 Chapter M-7)* and is needed for and will be used to update your student record. If you have any questions about the collection and use of this information contact the Associate Registrar, Registration and Enrolment Services at 864-8260.

REQUEST FOR COURSE LOAD WAIVER
FACULTY OF SCIENCE

The normal course load in any semester is fifteen credit hours, and in any session, six credit hours. Should you wish to register for more than the normal course load, and should your academic program not require you to register in more than the normal load you must obtain permission of the faculty of science. This permission must be processed before the registration systems will permit you to register in more than the normal course load.

Waivers will only be processed once the reserves are dropped in the semester applied for.

This form must be sent to your Academic Advisor who will then send it to the Associate Dean of Science. (science@mun.ca)

Co-op work term students MUST have their employer support their request. Send this form to the ASM-CE who will forward to the Associate Dean of Science. (science@mun.ca)

_____ _____ _____ _____
Year Student Number Last Name First Name

e-mail address:_____@mun.ca

Major(s)_____

Semester: Fall – F ☐ Winter – W ☐ Spring – S ☐

REASON FOR REQUEST:_____

_____

LIST ALL COURSES YOU PLAN TO TAKE:_____

_____

STUDENTS ON CO-OP WORK TERMS ONLY:

As this student's work term supervisor, I understand the impact that taking academic course(s) during this work term may have on the student's assigned work and I support this request.

Employer signature: _____ Date:_____