



# MARINE INSTITUTE

## COURSE CHANGE REQUEST FORM

**STUDENT NAME:**

**STUDENT NO.:**

**YEAR:**

**PROGRAMME:**

**EMAIL:**

I have read the Course Change Regulations to add or drop courses, and wish to add or drop the following Marine Institute course(s):

**COURSES TO BE ADDED:**

**COURSE NAME**

**CRN**

(Please include both lecture & lab CRN(s))

**COURSES TO BE DROPPED:**

**COURSE NAME**

**CRN**

(Please include both lecture & lab CRN(s))

Once this form is completed, or if you have any questions regarding this form, please email: [reghelp@mi.mun.ca](mailto:reghelp@mi.mun.ca)

**STUDENT SIGNATURE**

**DATE**

**PROGRAM CHAIR SIGNATURE**

**DATE**

**Access to Information and Protection Policy:** 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, please contact the Office of the Registrar at [miregistrar@mi.mun.ca](mailto:miregistrar@mi.mun.ca).