



I WISH TO REGISTER AS: Special Student (Graduate) (UNCL.NDGR) ACADEMIC SEMESTER: 20 ___ Fall Winter Summer

Please Print

NAME: (Surname) (First) (Middle)

BIRTH NAME: (If different, or if academic records are under a different name)

CHOSEN FIRST NAME: (if different from legal first name)

DATE OF BIRTH: (mm/dd/yyyy) UPEI STUDENT ID NUMBER: [grid]

CURRENT/LOCAL MAILING ADDRESS: Street, Box Number, RR#, Apartment #: City or Town: Province or State: Country: Postal/Zip Code:

PERMANENT/HOME ADDRESS: (if different from current/local address) Street, Box #, RR#, Apartment#: City or Town: Province or State: Country: Postal/Zip Code:

TELEPHONE: () EMAIL:

SOCIAL INSURANCE NUMBER: (required for income tax purposes)

IMMIGRATION STATUS: Canadian Citizen Permanent Resident Student Visa Other Visa (please specify)

Country of Citizenship: (if not Canadian Citizen)

LANGUAGE SKILLS: First Language (if not English): Language of instruction throughout my education was English: Yes No

I have taken an English-language proficiency test (official results required from authorized test company)

POST SECONDARY EDUCATION: Have you ever attended another post-secondary educational institution (university, college, etc.)? Have you ever been required to withdraw (dismissed/suspended) from an educational institution?

If yes, indicate: Date: (mm/dd/yyyy) Institution:

COURSE SELECTION AND CONFIRMED APPROVAL (alternately, emailed approval as per directions below)

Course Code	Section/CRN	Lab/CRN	Tutorial/CRN	Printed Name & Signature of the Program Coordinator of the Appropriate Graduate Program

Special Students -

Information on the Special Student regulation (permission to register in a graduate course without admission to a graduate program) can be found in the Academic Calendar, Graduate Program Regulations, Regulation #13.

Fee Payment Deadlines

Please refer to the Academic Calendar, Calendar Dates for information on Payment Deadlines, Add/Drop and Discontinuation Dates, and Refund Regulations.

Process to Follow

Complete the Special Student form then:

Option 1

Have the Program Coordinator of the appropriate Graduate Program sign the form granting approval then email the signed and completed form to studentsupport@upei.ca

Option 2

Have the Program Coordinator of the appropriate Graduate Program email their approval to studentsupport@upei.ca. This method must include the course name, section and semester in the body of the email along with the attached completed form)

DECLARATION OF APPLICANT:

With regards to this application form, I certify that the details provided are true and complete in all aspects, and no information has been withheld. I understand that falsifying documents or information on this form will result in immediate permanent dismissal from the University. Falsified documents maybe referred to the appropriate authorities for prosecution of the applicant under the Criminal Code of Canada. I agree to comply with the regulations of the University.

Applicant's Signature _____ **Date of Application** _____

The personal information collected on this form is subject to provisions of the UPEI Personal Information and Privacy Policy and is collected under the authority of the Universities Act. The information is collected in order to process and track the progress of Graduate Students, to maintain communication with those students, and to ensure that those students are in compliance with the regulations of the University of Prince Edward Island. If you have any questions about the collection of this information, contact us at 1-800-606-UPEI or write to The Registrar, University of Prince Edward Island, 550 University Avenue, Charlottetown, Prince Edward Island C1A 4P3