



Registrar's Office
 Room 130, 6299 South Street
 Henry Hicks Academic Administration Bldg
 PO Box 15000
 Halifax, NS B3H 4R2

Confirmation of Registration at Host University

(For students on letter of permission, exchange, or study abroad programs)

To be completed by the Student				
Last Name:		First Name:		
Dalhousie ID:				
To be completed by the Host Institution				
Please complete this form once student has formally registered for courses.				
Institution's Full Name:				
Confirmed Course/Module Registration at Host Institution				
Course/Module Code and Name	Credit Hours	% of Full Course/Module Load	Course/Module Start Date:	Course/Module End Date:
Tuition Charged:			Other Mandatory Fees: (excluding housing)	
School Official Signature:			Date:	
Printed Name:				
Position Title:				
Email:				
Phone #:		Fax #:		

Please return completed form to:
 Assistant Registrar, Financial Aid
 Registrar's Office, Dalhousie University
 PO Box 15000
 Halifax, NS B3H 4R2

awards@dal.ca
 fax: 902 494-1630