

Authorized signature: ___

Registrar's Office

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

Application for a Waiver of an Academic Regulation

You are responsible for submitting this form to the appropriate office as indicated below. Submit to: Faculty: Assistant Dean, Students, Agriculture, Room 117, Cumming Hall, 62 Cumming Drive (fax-893-3430) Agriculture Architecture and Planning School of Architecture, "H" Building, 5410 Spring Garden Road (fax - 423-6672) ☐ Arts and Social Sciences Assistant Dean, Student Affairs, Ste 3030, Marion McCain Bldg FASS, 6135 University Ave. (fax - 494-1957) Appropriate School, e.g. Pharmacy, Nursing etc. □ Health Program Administrator, Bachelor of Management, 6100 University Avenue (fax - 494-3480) ■ Management Program Administrator, Bachelor of Commerce, 6100 University Avenue (fax - 494-3480) ■ Management □ Science Assistant Dean, Student Affairs, Room 827, Biology Wing, Life Sciences Centre (fax - 494-1123) ■ Engineering Associate Dean, Engineering, 5217 Morris St. (fax - 429-3011) Faculty of Computer Science, 6050 University Ave. (fax - 492-1517) ☐ Computer Science Important: Please provide name and current address for reply. Please Print Clearly Name Student # Address _____ Phone ____ Degree program: ____ Are you on Canada Student Loan? (please check) ☐ Yes ☐ No Please outline your request along with reasons for it, and provide any information you think will assist the committee in making a decision. (If appropriate, please attach supporting documents, e.g., medical certificate, letter from class instructor, etc.) Student's signature: Office Use Only Approved NOT Approved Effective date: Comments: