



<input type="checkbox"/> Undergraduate Studies <input type="checkbox"/> Seminary <input type="checkbox"/> Graduated from Tyndale	NAME: _____ STUDENT ID: _____ <div style="display: flex; justify-content: space-around; font-size: small;"> (First Name) (Last Name) </div> PHONE: _____ EMAIL: _____
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*Terms: FA = Fall 2023, IN = Intersession 2024, WI = Winter 2024, SS = Spring Summer 2024

ADD the following course(s):

FA	IN	WI	SS	Course Code	Section	Course Title	Credit (CR)	Audit (AU)
✓				e.g. BIBL 0501	1A	Biblical Interpretation (example)	CR	

DROP the following course(s):

FA	IN	WI	SS	Course Code	Section	Course Title	Credit (CR)	Audit (AU)
✓				e.g. BIBL 0501	1A	Biblical Interpretation (example)	CR	

REQUIRED SIGNATURE(S):

- I have read, understand, and agree to be bound by the academic and financial policies and procedures outlined in the Academic Calendar that are associated with the program and academic term(s) for which I am now registering.

Student's Signature:	Date:
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- If one of the following apply to you, please obtain the signature of a Student Financial Services' representative (sfs@tyndale.ca) before submitting this form to the Office of the Registrar:
 - ☐ I am an **international student**.
 - ☐ I am a **government loan recipient looking to DROP courses after the add/drop deadline**. I have completed the **Considerations for Dropping Courses for OSAP Recipients** form via Flow.Tyndale.ca and understand the additional consequences of my decision.
 - ☐ I have a **financial hold on my account**.

Student Financial Services' Signature:	Date:
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- If your registration requires additional permission, please obtain the signature from the respective faculty or staff before submitting this form to the Office of the Registrar:

Approved By (Name & Signature):	Date:
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OFFICE OF THE REGISTRAR'S USE ONLY:		
Received/Processed by:	Processed on:	Copy to SFS (for Withdrawal) <input type="checkbox"/>