

## LETTER OF PERMISSION APPLICATION

Payment of \$75 is required for every application per institution and is non-refundable. If a revision needs to be made to this application an additional fee of \$25 is required. To be eligible for a Letter of Permission you must be in good academic and financial standing at the University of Windsor, and you must have completed five courses. Please allow a minimum of 2 weeks for this application to be processed.

Last Name	Given Name Phone	
Student ID		
Email		·····
U Windsor Degree		
do not see the course listed, you n form to transcripts@uwindsor.ca;	tabase to see if a course has already been on the second terms of	vith this completed Letter of Permission ermission" and/or "Course Outline" and
Institution I wish to enroll in Name of Institution		(ONE institution per form)
Address	City/Province	
Institution Email		<u>-</u>
The course will be completed d	l <b>uring</b> : Fall □ Winter □ Spring □ Su	ımmer □ Year:
Course Code	Course Title	Proposed Uwindsor Course to be substituted
✓ It is advisable to speak to an application.	I academic advisor before submitting this L	etter of Permission
	mit an official transcript to the University o grade of 60% must be obtain for transfer	
✓ If you need to <b>cancel</b> this req	uest, send notice to transcripts@uwindso	r.ca.
Student Signature:		