

CHANGING LIVES IMPROVING LIFE	Letter of Permission	
Last Name: Student ID: Department/Schoo	First Name: Degree Program:	
 Only one LOP course peroutside of the University LOP application must be The course requested representation (no audits are permitted) Students are responsibed. Students must maintained. An official transcript meminimum grade of 70% Following successful control 	If at the time of application for Letter of Permission approval. For program is permitted. Students may not complete more than half of the try of Guelph, either through LOP, OVGS, or advanced credit transfer processe approved in advance; approvals will not be granted retroactively. In must normally be a graduate level course required for the student's prograd). It is for making the necessary arrangements for admission to the host university of Guelph registration while taking a course on letter of sust be submitted from the host university directly to OGS following success (B-) is required for credit to be granted. LOP courses will not appear on the impletion of the course and receipt of the official transcript (see #7), the locosts incurred at the host institution, up to a maximum of \$500, upon precessing the program of the course and receipt of the official transcript (see #7), the locosts incurred at the host institution, up to a maximum of \$500, upon precessing the program of the course and receipt of the official transcript (see #7), the locosts incurred at the host institution, up to a maximum of \$500, upon precessing the program of the course and receipt of the official transcript (see #7), the locosts incurred at the host institution, up to a maximum of \$500, upon precessing the program of the pro	ram. The course must be taken for creditersity and for any fees payable. If permission. essful completion of the course; a the student's U of G transcript. University of Guelph agrees to reimburs
STUDENT: Academic Term Fro	om: To:	
Course Requested: (attach of	fficial course of calendar description)	
Host Course Number	Host Institution	Credit Value
Faulates To: (If no equivalent of	exists, specify generic equivalency, e.g. HIST 600-level)	
U of G Equivalent Course	Course Title	Credit Value
Guelph. I understand that a required fee of \$50.00 has	on to take the following course to be included as part of my an approved Letter of Permission does not guarantee admiss been received by Enrollment Services. I acknowledge my resent directly to the University of Guelph upon completion of	sion to the host university. The sponsibility for ordering a

I here Guelp requi trans

Student Signature:	Date:	
DEPARTMENT/SCHOOL USE ONLY: The department recommends that the cour	se listed be accepted as per the equivalency stated above.	
Student's Advisor:	Date:	
Graduate Coordinator:	Date:	
ENROLLMENT SERVICES USE ONLY: The required \$50 payment has been received.		
Receipt Number:	Initials: Date:	
OFFICE OF GRADUATE STUDIES USE ONLY: Dean of Graduate Studies:	Date:	

Protection of Privacy: We are committed to protecting your privacy. Personal information is collected under the authority of the University of Guelph Act and pursuant to the Freedom of Information and Protection of Privacy Act (FIPPA). If you have questions about the use and disclosure of your personal information, call the Office of Graduate Studies at (519) 824-4120 ext. 56833. You can also find more information about access to information and protection of privacy at the University of Guelph from the **University Secretariat**.