



**NICOLA VALLEY  
INSTITUTE OF  
TECHNOLOGY**  
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# Course Change Form

## Instructions

1. If you have already registered in one or more courses in a term, use this form to make changes to your registration (add or drop courses).
2. Consult the calendar, and if necessary an advisor, to ensure you will still be able to meet your educational goals.
3. If you wish to audit a course, clearly write that in the notes section to the right of the course information. Instructor's approval is required for audit registrations; please have the instructor initial next to the entry.
4. Complete this form and submit it to the Registrar's Office along with any additional payment or sponsorship letter required. Ensure you get an updated course schedule reflecting the changes.

## PERSONAL INFORMATION

Student Number: \_\_\_\_\_ Student Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Current Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_

Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Telephone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

## Term Information:

Registration Term     Fall     Spring     Summer    Year (eg. 2006) \_\_\_\_\_

## Course(s) to Add:

Course Code	Number	Section	Course Title	Notes

## Course(s) to Drop or Withdraw (see the calendar for drop/withdraw deadlines)

Course Code	Number	Section	Course Title	Notes

## Declaration and Signature:

I understand that:

1. Once this form is submitted my registration will be adjusted according to the information above, subject to successful completion of prerequisites. If a course section is full, I will be placed on a waitlist and will be automatically registered if a space becomes available.
2. If I wish to withdraw from a course or be removed from a waitlist, I must submit a completed course change form to the Registrar's Office by the deadlines stated in the Calendar. Non-attendance will not result in a withdrawal.
3. I am responsible for ensuring payment of the fees associated with the requested courses as stated in the Calendar.
4. I am responsible for ensuring that I fulfill graduation requirements for my program as listed in the Calendar.

I accept the conditions of registration and request the above changes to my registration.

Signature \_\_\_\_\_

Date \_\_\_\_\_