Application Form- Ontario Visiting Graduate Student (OVGS)

# Part 1: Student Details

To be completed by the student.

First name:       Last name:

WLU ID:       Program (e.g. MSc Geography):

WLU email:      @mylaurier.ca Telephone:

Address:       Date of Birth (DDMMYYYY):

Home University:       Host University:

Host University ID (if you have already been assigned an ID):

# Part 2: Course(s) Request

To be completed by the student.

I hereby request permission to take the following course(s) required for my degree at the following institution:

Host University:       From (MMYY-MMYY):

Host Department:       Dates of previous registration at this university:

## First Course Details

Course #:       Course title:       Instructor:

Half credit [ ]  Full credit [ ]

Fall term [ ]  Winter term [ ]  Spring term [ ]

## Second Course Details (if applicable)

Course #:       Course title:       Instructor:

Half credit [ ]  Full credit [ ]

Fall term [ ]  Winter term [ ]  Spring term [ ]

Student’s Signature:       Date:

# Part 3: Approval Signatures

To be completed by members of the Home and Host University.

The following signatures are required to process this application.

## Home University: Wilfrid Laurier University

Graduate Coordinator or Department Chair Signature:
Date:

FGPS Signature:      Date:

Select One: this is an invoiced course [ ]  this is a non-invoiced course [ ]

## Host University:

Department Chair Signature:
Date:

Graduate Dean Signature:      Date:

Select One: this is an invoiced course [ ]  this is a non-invoiced course [ ]

On signing approval, the Graduate Dean of the Host University sends copies to the Graduate Dean of the Home university and the applicant. Each Dean also sends copies to their appropriate department chairs, Registrar’s Offices and Accounts Offices. After the student has enroled and after the term enrolment report date, the Accounts Office of the Host University is requested to send an invoice to: Accounts Payable, Wilfrid Laurier University, 75 University Avenue West, Waterloo, Ontario N2L 3C5.

# Part 4: Additional Student Information

To be completed by student.

Is this course(s): Required for your program [ ]  An elective course(s) [ ]

If required, why are you taking it/them at another institution?

If an elective, why are you requesting permission to take this/these course(s)?

# Part 5: Additional Staff Information

To be completed by Program Director/ Program Coordinator

Indicate why this requested course(s) must be taken at another university at this time:

Graduate Coordinator’s Signature:       Date:

# Notice of Collection of Private Information

Wilfrid Laurier University collects personal information under the authority of the Wilfrid Laurier University Act. Personal information collected by any part of the University may be used or disclosed by other units in order to execute the various functions of the University and to administer the various relations between the University and its students, alumni, employees, clients, suppliers, partners, and others. If you have questions about the policy, visit the [Privacy and Access](https://www.wlu.ca/about/public-accountability/privacy/index.html) at Laurier page.