



Registrar's Office
282 Cummer Avenue
Toronto, ON M2M 2E7
Phone: (416) 482-2224; Fax: (416) 482-7004
Website: www.mcs.edu

Independent Study (Reading) Course Request Form

Student Initiated College Initiated Date:
Name: Number:
Course Code & Name:
Instructor:
Reason for Taking Course:

How many Independent Study Courses have you completed? (A maximum of TWO is permitted). What is your GPA? (A minimum GPA of 3.0 is required).

If you are ONLY doing an Independent Study Course(s), payment for the course(s) MUST be received at the time of registration.
Payment Method: Cash Cheque
Name on the Charge Card:
[ ] Visa Card # Expiry 3-digit Security Code
[ ] MasterCard # Expiry 3-digit Security Code
Signature of Card Holder: Date:

Course Completion Date: Last day of classes of the semester.

Student Signature:
Approved by Registrar:
Comments:

OFFICE USE ONLY
Copy To: Academic Office Instructor Student File