

Concurrent studies is for students who want to take one or two post-secondary courses while completing secondary school.

**Instructions:** Complete this form in **black or dark blue ink** and submit it along with your application for admission, application fee, and all supporting documents, no later than one month before the start of the semester for which you are applying. All requests are subject to space availability, as well as approval of the instructor and department head.

Student information				
Last name (family name)		First name and initials		UFV student ID (if applicable)
Daytime phone <small>Area code</small>	Email address		Mailing address (street number, street)	
City or Town	Province	Country (if not Canada)		Postal code
UFV course(s) and the section(s) applied for:				<i>Note: A maximum of two courses per semester is permitted. Exceptions must be approved by the appropriate dean.</i>
If you have already discussed your course choice with someone from UFV (e.g., the department head or instructor), please indicate with whom you have spoken:				

Application checklist	
<p><b>Please attach:</b></p> <p><input type="checkbox"/> Application for admission*. Indicate '<b>Concurrent Studies</b>' for the program.</p> <p><input type="checkbox"/> \$45 application fee*.</p> <p><input type="checkbox"/> Recent high school transcript showing the last year completed, and courses in progress.</p> <p><input type="checkbox"/> Letter of recommendation from the high school principal or counselor.</p> <p><small>* Not required for students who have taken concurrent studies courses within the past two years.</small></p>	
<p><b>Permission of the instructor and department head is required and will be obtained upon submission of this request. Evidence of meeting course prerequisites and readiness for university studies will also be required.</b></p>	
Student's signature	Date

Parent's approval	
I am in support of this request. I am aware that all communication from UFV will be made directly with the student.	
Parent or legal guardian's name (please print)	
Signature	
Date	

**Please forward this form to: UFV Admissions, 33844 King Road, Abbotsford BC V2S 7M8**  
or fax: **604-853-0138** ~ For further information, please call **604-864-4645** or **604-864-4540**.

OFFICE USE ONLY	
Request approved for...	Course 1:
Term	Course
<div style="border: 1px solid black; border-radius: 15px; width: 100px; height: 100px; margin: 0 auto; display: flex; align-items: center; justify-content: center;"> <span style="font-size: 2em; font-weight: bold;">LABEL</span> </div>	Instructor's signature
	Department head's signature
	Course 2:
	Course
	Instructor's signature
	Department head's signature