



# REQUEST TO ENROL IN AN ELECTIVE

**SURNAME:** \_\_\_\_\_ **FIRST NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_ **POST CODE:** \_\_\_\_\_

**SID:** \_\_\_\_\_ **MAJOR STUDY:** \_\_\_\_\_ **STAGE/YEAR:** \_\_\_\_\_

**PHONE NO.** \_\_\_\_\_ **MOBILE:** \_\_\_\_\_

**EMAIL (USYD A/C):** \_\_\_\_\_

List the Electives you wish to add to your enrolment.

	Code	Unit of Study (full name)	Semester	Year
1 <sup>st</sup> preference			1	2009
2 <sup>nd</sup> preference			1	2009

Please indicate your reasons for wishing to undertake an Intermediate or Advanced Elective if you have not previously completed an Introductory Elective in the same studio.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*FACULTY OFFICE USE*

**Associate Dean (Learning & Teaching) Decision for Intermediate/Advanced Electives**

**APPROVED**  **NOT APPROVED**

**Comments:**

**Signature:** \_\_\_\_\_ **Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_