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| KEYANO STUDENT ID 000- |
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IN OFFICE USE ONLY

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|---------------|--------------|------------|-----------------------------------|-------------|-------------|
| LAST NAME | | FIRST NAME | | TELEPHONE # | |
| ADDRESS | | | CITY | PROVINCE | POSTAL CODE |
| ACADEMIC YEAR | PROGRAM NAME | | | | |
| EMAIL | | | SPONSORING AGENCY (IF APPLICABLE) | | |

ADD COURSES TO SCHEDULE

| Fall Semester | | | Winter Semester | | |
|---------------|---------|-------------|-----------------|---------|-------------|
| COURSE CODE | SECTION | COURSE NAME | COURSE CODE | SECTION | COURSE NAME |
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| Spring Semester | | |
|-----------------|---------|-------------|
| COURSE CODE | SECTION | COURSE NAME |
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NOTES: Please add any additional information (i.e. preference of day or evening classes)

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|---|------|
| STUDENT SIGNATURE * | DATE |
| ADVISOR/CHAIR SIGNATURE (IF APPLICABLE) | DATE |

*Signature is not required if submitting this form and supporting documentation via your keyanomail account.

| OFFICE USE ONLY | |
|---|------|
| APPROVED BY (OFFICE OF THE REGISTRAR SIGNATURE) | DATE |
| PROCESSED BY (SIGNATURE) | DATE |

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