

**FACULTY OF BUSINESS**  
**PERMISSION and REQUEST FORM**  
 Return completed form to [sjadvising@unb.ca](mailto:sjadvising@unb.ca)  
 Responses sent to UNB email address only

NAME & STUDENT #: \_\_\_\_\_ UNB Email: \_\_\_\_\_

DATE: \_\_\_\_\_

REQUEST: *(Please fill out a separate form for each request)*

Declare a major/minor/concentration in \_\_\_\_\_

Degree Audit Date of completion \_\_\_\_\_

Submit electronically a complete degree audit form to [sjadvising@unb.ca](mailto:sjadvising@unb.ca) .

Form found at <https://www.unb.ca/saintjohn/business/current/advising/audit.html>

Permission to take a course out of sequence - Are you enrolled in the course  Yes  No

Course requested \_\_\_\_\_

Permission to take a sixth course (Min. GPA=2.7) Course requested \_\_\_\_\_

Permission to take a course online (Min. GPA=2.7) Course requested \_\_\_\_\_

Other (explain below)

**REASON FOR REQUEST AND SUPPORTING INFORMATION:**

*(Mandatory for permission to take six courses, a course out of sequence or a course online)*

\_\_\_\_\_  
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**Office Use Only:**

|                |   |   |             |
|----------------|---|---|-------------|
| DECISION:      | <b>Granted:</b>                         | Academic Advisor _____                  | Date: _____ |
|                |   | Instructor _____                        | Date: _____ |
|                |   | Associate Dean Undergrad. Program _____ | Date: _____ |
| <b>Denied:</b> | Academic Advisor _____                  | Date: _____                             |             |
|                | Instructor _____                        | Date: _____                             |             |
|                | Associate Dean Undergrad. Program _____ | Date: _____                             |             |

|  |          |
|--|----------|
| Date Registrar's Office informed _____           | by _____ |
| Date College of Extended Learning informed _____ | by _____ |
| Date student informed of decision: _____         | by _____ |