CONTINUING STUDIES OUVICE

Course Registration Form

All registrations must be accompanied by full fees, payable to the University of Victoria.

The Division of Continuing Studies reserves the right to cancel/reschedule courses or other offerings without notice, and to establish special regulations for admission to non-degree programs or courses. If a course or offering is cancelled/rescheduled, the liability of the Division of Continuing Studies is limited to a refund of the course fee, or, if desired, transfer to another offering.

Please notify us of any changes to your name and address.

Signature (mandatory for credit card)

The University of Victoria collects personal information on its form pursuant to the *University Act*, RSBC 1996, c.468 and section 26 of the *Freedom of Information and Protection of Privacy Act*. The information you provide is used for the purposes of admission, registration and other decisions relating to your Continuing Studies program.

For details on how the information is used, contact Continuing Studies or read UVic Policy 4400, Access to Student Records at: registrar.uvic. ca/home/documents/access.html. The relevant law for all matters concerning these programs shall be the law of the Province of British Columbia, Canada.

Phone registration: 250-472-4747

Mail completed registration form to:

Division of Continuing Studies University of Victoria PO Box 1700 STN CSC Victoria, BC V8W 2Y2

Web registration:

continuing studies.uvic.ca/info-for-students/ how-to-register

Inquiries:

250-472-4747 | register@uvcs.uvic.ca

Division of Continuing Studies, University of Victoria – Course registration

Courses fill up fast—consider registering online at continuingstudies.uvic.ca

Student record Ms/Mrs/Mr ___ Surname First name Middle name Preferred name ☐ UVic student #___ ☐ I have previously taken a UVic credit course ☐ I have previously taken a UVic non-credit Mailing address ___ course Street address Mail list ☐ I do not wish to receive further mailings Province Postal code Special needs ☐ Provide details here: _____ (YY/MM/DD) Would you like to stay informed about new courses, programs, special offers and events? If you do not check this box, you will still receive communications relating to the administration of your course/program. Tyes, I would like to receive this information by email. Course selection, independent study materials, or gift certificates Total enclosed: \$ ____ If you are paying by credit card, please call 250-472-4747. Credit card □Visa □ MasterCard □ AmEx Account number_____ Expiry date____ CVD#

