



Request for Course Reduction

Doctoral students only: Course reduction will be limited to two half course equivalents taken from an appropriate MSc program.

Name:

Student number:

Field:

Degree:

Previous graduate courses (please attach the syllabus for each course listed below)

Course number and title	Credit weight (half/full)	Institution where course was taken	Related UofT CHM course number and title	Grade

Planned graduate courses at UofT

Course number and title	Credit weight (half/full)

Rationale for course reduction. Provide a brief justification for your course reduction request in the context of the knowledge base/skill set required for your doctoral studies. Use free form letter if necessary.

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Student's signature: (print name and sign)	Date:
Supervisor's signature: (print name and sign)	Date:

Grad Office: Attach "approval" e-mails from course instructors, if applicable.

Approved by:

GSC Representative: (print name and sign)	Date:
Associate Chair, Graduate Studies: (print name and sign)	Date: