Letter of Permission Request

TRU-OL Student Services, 900 McGill Road, Kamloops, BC V2C 0C8 Fax 250.852.6405 www.truopen.ca

GENERAL INFORMATION

- It is the student's responsibility to arrange for official transcripts to be sent (if required) to the institution where they are applying to enrol.
- In order to transfer credits to Thompson Rivers University, Open Learning (TRU-OL), an official transcript must be sent to TRU-OL Student Services upon successful course completion.
- Submit course outlines and the completed form by mail or fax to TRU-OL Student Services (as above).
- Students should allow up to two weeks to receive a mailed response.
- The information you provide to TRU-OL is collected under the Thompson Rivers University Act (BC) and will be used only to administer your request. Relevant information may be shared with institutions named on this form.
- Direct questions to Student Services, email: student@tru.ca or phone: 1.800.663.9711 (toll-free in Canada) or 250.852.7000 (Kamloops and International).

ERSONAL DATA (PRINT CLE		
PERSONAL DATA (PRINT CLEARLY)		
URNAME (legal)		
IRST NAME (legal) FULL MIDDLE I	NAME(S) (legal)	
ROGRAM OF STUDY		
AILING ADDRESS		
AILING ADDRESS (include buzzer code	e if applicable)	
ITY / TOWN / VILLAGE		
ROVINCE / STATE	DE / ZIP CODE	
IOME TELEPHONE NUMBER	BUSINESS TELEPHONE NUMBER	
REA CODE	AREA CODE LOCAL	

THOMPSON RIVERS

OPEN LEARNING

REQUEST

I am requesting a Letter of Permission to take the following course(s) at:

NAME OF INSTITUTION		
ADDRESS OF INSTITUTION		
CITY / TOWN / VILLAGE		
PROVINCE / STATE	POSTAL CODE / ZIP CODE	COUNTRY
COURSE NUMBER COURSE NAME		
SEMESTER (fall/winter/spring/summer)		TRU-OL REQUIREMENT
COURSE NUMBER COURSE NAME		
SEMESTER (fall/winter/spring/summer)		TRU-OL REQUIREMENT
COURSE NUMBER COURSE NAME		
SEMESTER (fall/winter/spring/summer)		TRU-OL REQUIREMENT
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SEMESTER (fall/winter/spring/summer)		TRU-OL REQUIREMENT

FAX OR EMAIL THIS FORM (SEE TOP OF FORM) 05/20/11 • MC114535