

SCHOOL OF GRADUATE STUDIES

APPLICATION FOR CONTINUANCE

Graduate students who get an F (<70%) on a course may apply to the Graduate Advisor / Graduate Chair for permission to re-take the course using an application for continuance form.

Studen	nt Information:					
Student Name:				Student Number:		
Student Email:			S	Supervisor's Name:		
Progra	am:					
Failed	Course Information:					
Course	e Code	Grade	Term	Course Faculty		
Gradu	ate Advisor/Chair Reco	ommendation:				
Recommendation of withdrawal from program						
	Recommendation to repeat above mentioned course in Term Year					
	Recommendation of					
	Course	offered	Term	Year		
Gradu	ate Coordinator/Chair:					
Name (print)		Signature		Date		
Studen	nt Acceptance:					
Name (print)			Signature		. Date	

Please submit complete forms to the School of Graduate Studies at sgs@nipissingu.ca

School of Graduate Studies Updated: 10/17/2018