



PEY Co-op Course Approval Request Form

Instructions for Submission:

- Have this form completed with your information and signature and your Manager/Supervisor's information and signature.
- Submit the completed form to pey.coop@utoronto.ca for review and approval.
- The form will be reviewed by the Engineering Career Centre (ECC).
- You will receive an email confirmation of the approval decision.

Course Information	
Course Code: _____	Course Title: _____
Start Date: _____	End Date: _____ Time: _____
# of In-Class (Lecture/Tutorial/Lab) Hours/Week: _____	
# of Credits Remaining After Taking this Course: _____	
Part or all of the schedule for this course will be held during regular working hours: Yes <input type="checkbox"/> No <input type="checkbox"/>	

Student Information	
Student's Full Name: _____	_____
Academic Program: _____	Student Number: _____
Telephone Number: _____	Email Address: _____
<p>I am requesting approval to take the above-mentioned course during my PEY Co-op work term and I acknowledge the following:</p> <p><input type="checkbox"/> My priority is to meet the requirements and expectations of my role as set by my Manager/Supervisor without any disruption to my overall work performance.</p> <p><input type="checkbox"/> It is strongly recommended that I not take a course in the first few months of starting my PEY Co-op work term so that I can concentrate on transitioning effectively into my new role.</p> <p><input type="checkbox"/> I am electing to take a course during my PEY Co-op work term; doing so is <u>NOT</u> a requirement of the PEY Co-op program.</p> <p><input type="checkbox"/> It is <u>MANDATORY</u> that I return to full-time studies following my PEY Co-op work term.</p> <p><input type="checkbox"/> I will have sufficient academic credits remaining to return to full-time studies for at least one full academic term.</p> <p><input type="checkbox"/> I am not permitted to take a core/required course for my program (Engineering students only).</p> <p><input type="checkbox"/> I may be required to provide course documentation verifying the above.</p>	
Student Signature: _____	Date: _____



Manager/Supervisor Information & Approval

Manager/Supervisor Name: _____

Job Title: _____ Company Name: _____

Telephone Number: _____ Email Address: _____

I have reviewed this form and confirm that the work performance of _____ (Student's Full Name) will not be disrupted by taking a course during the PEY Co-op work term. I approve the request to take the above-mentioned course.

Manager/Supervisor Signature: _____ Date: _____

PEY Co-op Staff Member Information & Approval

PEY Co-op Staff Name: _____ Job Title: _____

Telephone Number: _____ Email Address: _____

I have reviewed the request submitted by _____ (Student's Full Name) and approve the request to take the above-mentioned course.

ECC Staff Member Signature: _____ Date: _____