

Notice of Collection of Personal Information

Your personal information is collected under the authority of the *University of Ottawa Act*, 1965, in accordance with the *Freedom of Information and Protection of Privacy Act* of Ontario and University Policy 90. The personal information you provide on this form will be used by the University for purposes consistent with the admission, registration and evaluation of your undergraduate course registration. If you have questions about the collection, use and disclosure of your personal information, please contact InfoService at 613-562-5630 or infoservice@uOttawa.ca.

REGISTRATION - SPECIAL STUDENT (UNDERGRADUATE)

- BEFORE COMPLETING THIS FORM, PLEASE READ THE GENERAL REGULATIONS AND PROCEDURES FOR SPECIAL STUDENTS CAREFULLY. - DO NOT WRITE IN SHADED AREAS.

Form section containing personal details: TERM (Fall, Winter, Spring/Summer), STUDENT NO., MR./MRS./MISS/MS./DR., LAST NAME, FIRST NAME, MIDDLE NAME, SEX (Male/Female), DATE OF BIRTH (Year, Month, Day), MOTHER TONGUE (French/English/Other), LANGUAGE OF CORRESPONDENCE (French/English), COUNTRY OF BIRTH and CITIZENSHIP, and current status (Permanent Resident, Study Permit, Diplomat, Refugee, Other).

Form section for addresses: PERMANENT ADDRESS and LOCAL MAILING ADDRESS. Fields include C/O (if applicable), NO. AND STREET, CITY, PROVINCE, COUNTRY, POSTAL CODE, TEL. NO., TEL. NO. AT WORK, EXTENSION, and E-MAIL.

Form section for CATEGORY. Options include: PERSONAL INTEREST (Maximum 6 credits), PROFESSIONAL CERTIFICATION (Provide association name), TRANSFER OF CREDITS (Include permission letter), UPGRADING (Include transcript copy), GIFTED STUDENT (Include recommendation letter), IMPROVING ACADEMIC STANDING (For withdraw students), RESEARCH (Include invitation letter), and ENGLISH INTENSIVE PROGRAM (For intensive program students).

Form section for COURSE SELECTION. Includes header: 'YOUR REGISTRATION IS NOT OFFICIAL UNTIL APPROVED BY THE FACULTY.' and a table with columns: COURSE CODE (Letters A-C, Numbers 1-4), SECTION, AUDITOR (AUD), LABORATORY (LAB), DISCUSSION GROUP (DGD), INT., and APPROVAL (FOR FACULTY USE) with fields for DATE and SIGNATURE (FACULTY, SCHOOL, DEPARTMENT).

CAMPUS field with a shaded area for text entry.

I AGREE TO PAY THE FEES ARISING FROM THIS REGISTRATION AND AGREE THAT I WILL OWE ANY UNPAID FEES TO THE UNIVERSITY OF OTTAWA UNLESS I INFORM THE UNIVERSITY IN WRITING (VIA LETTER OR APPROPRIATE FORM) OF MY INTENT TO CANCEL MY REGISTRATION PRIOR TO THE DEADLINE FOR FULL REFUNDS AS SPECIFIED UNDER THE IMPORTANT ACADEMIC DATES AND DEADLINES ON THE UNIVERSITY WEBSITE.

I HAVE READ AND UNDERSTAND THE REGULATIONS AND PROCEDURES APPLICABLE TO SPECIAL STUDENTS. I CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND COMPLETE, INCLUDING MY DECLARATION OF CITIZENSHIP AND STATUS IN CANADA. ANY FALSE DECLARATION ON MY PART MAY RESULT IN THE CANCELLATION OF MY REGISTRATION. I AGREE TO ABIDE BY ALL REGULATIONS OF THE UNIVERSITY OF OTTAWA.

I HAVE READ AND UNDERSTAND THE PREAMBLE STATING THAT AT ALL TIMES MY PERSONAL INFORMATION IS PROTECTED IN ACCORDANCE WITH THE FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT.

Signature line with fields for YEAR, MONTH, DAY and SIGNATURE (STUDENT).