



The personal information collected on this form is collected under the legal authority of the **Royal Charter of 1847**, as amended. **The personal information collected on this form will be used to officially register you in your course selections.**

This form must be returned to the Graduate Studies & Research office as soon as possible.

All course registrations are on a first come first serve basis

**Program Planning Form
NEW STUDENTS
AWIES Master of Education Program**

Name: Student Number:

Email Address:

To be completed in consultation with your Program Advisor.

Fall Term Course #	Year	Area of Study	Winter Term Course #	Year	Area of Study	Spring/Summer Term Course #	Year	Area of Study

I understand that the courses listed above constitute an approved program of study for the AWIES M.Ed degree. I also understand that any changes in this list of courses should be discussed and approved by my Program Advisor and the Coordinator of Graduate Studies and Bureau of Research in Education.

Student's Signature:

Date:

Program Advisor's Signature:

Date:

Associate Dean's Signature:

Date: