

## LETTER OF PERMISSION FORM

A student currently registered at CBU will not receive credit for courses taken elsewhere unless prior permission has been granted. It is the responsibility of the student to make arrangements to have an official transcript forwarded to CBU upon completion of courses. Please note that the signature of the Dean is required to receive credit for courses taken at another institution. Once approved, this form will be provided to the host institution.

Student Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

Program: \_\_\_\_\_

Address Line 1: \_\_\_\_\_ Address Line 2: \_\_\_\_\_

City, Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Email: \_\_\_\_\_

Name of the post-secondary institution where you intend to register: \_\_\_\_\_

Academic Semester: \_\_\_\_\_ Do you expect to graduate this year?  YES  NO

*\*A Letter of Permission is only valid for the selected semester. Spring/Summer or Fall/Winter\*  
If course is not taken during that semester a new form must be submitted.*

OTHER INSTITUTION SUBJECT	COURSE #	OTHER INSTITUTION COURSE TITLE	CREDIT	CBU COURSE EQUIVALENT	EQUIVALENCY ACCEPTED
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Approval of CBU Course Equivalent given by: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Student: \_\_\_\_\_

Date: \_\_\_\_\_

**Permission is granted for transfer credit for the courses listed above.**

Signature of Dean or Designate: \_\_\_\_\_

Date: \_\_\_\_\_

Upon approval this form will be provided to the host institution.

*Students who have completed an accredited immersion program while a student at CBU, may be granted maximum of 6 credits of French. The CBU equivalency for the French immersion credits will be determined by a member of the French faculty in consultation with the student, Department Chair, and Registrar's Office.*

**FOR INTERNAL USE ONLY**

Notes:

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PERC code added by: \_\_\_\_\_ (initials)

Date: \_\_\_\_\_

Transcript received by Student: \_\_\_\_\_ (initials)

Date: \_\_\_\_\_

Credits Awarded and Student/Dean Notified: \_\_\_\_\_ (initials)

Date: \_\_\_\_\_



**Cape  
Breton  
University**

OFFICE OF REGISTRAR  
AND ADMISSIONS