

UNIVERSITY OF TORONTO MISSISSAUGA

**Department of Chemical and Physical Sciences – Application Form for
PHY473H5: Supervised Readings**

A program of individual study chosen by the student with the advice of, and carried out under the direction of, a Physics professor.

Prerequisites: Permission of the course co-ordinator.

Note: Enrollment in this course requires the submission of an application form to the CPS Undergraduate Assistant and registration on ACORN. **Please visit the CPS website (<http://uoft.me/cpsforms>) for application forms, instructions, and submission deadlines.**

Full Name (Print): _____
(Surname, given name, and any initials)

Student Number: _____ Registration Session: _____
(eg. Fall 2021)

Phone Number: _____ Email: _____@mail.utoronto.ca

Program (to which this course will apply): _____

Before submitting your application, you must **speak to your supervisor**. Once you have done so, list their name below and submit the form to the Undergraduate Administrative Assistant at cpsug.utm@utoronto.ca.

I have met with _____, who has agreed to be my supervisor for PHY473H5.
(Name of supervising faculty)

Student's Signature

Date

Below is for Office Use Only

Notes from the Undergraduate Administrative Assistant, Eliza Escandar:

Supervising Faculty's Signature

Date

Course Coordinator's Signature

Date

Approved in ROSI: Yes No

Christina Fortes

Academic Counsellor/Undergraduate Program Administrator

Date