

# Bachelor of Integrated Studies (B.I.S.)

## B.I.S. Contract Deletion Form

**Student's Name:** \_\_\_\_\_ **W#** \_\_\_\_\_

**Dept. granting the deletion:** \_\_\_\_\_

1. The student named above would like to delete the following course from his/her contract:

Prefix: \_\_\_\_\_ Number: \_\_\_\_\_ Class title: \_\_\_\_\_

No. of credits: \_\_\_\_\_

Reason for the deletion: \_\_\_\_\_

\_\_\_\_\_

2. The student named above would like to delete the following course from his/her contract:

Prefix: \_\_\_\_\_ Number: \_\_\_\_\_ Class title: \_\_\_\_\_

No. of credits: \_\_\_\_\_

Reason for the deletion: \_\_\_\_\_

\_\_\_\_\_

**As the department chair or student advisor, I agree to this change in the student's BIS contract:**

**Signature:** \_\_\_\_\_

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

**Comments:**

\_\_\_\_\_

\_\_\_\_\_

*Please return this form to the BIS coordinator, Academic Advisement Center, SC 140.*

\_\_\_\_\_

Received by: \_\_\_\_\_

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

(JE April 2006)