

CREDIT/NON-CREDIT DESIGNATION

University of Lethbridge ID Number:	Effective Term: o Fall 20__ o Spring 20__ o Summer 20__
Last Name:	First Name:
Program (e.g. B.A) :	Major (e.g. Sociology) :

Please fill out all information requested below in order to have your request processed as quickly as possible.

Course Subject and Number <i>(e.g. WRIT 1000)</i>	Section <i>(e.g. A)</i>	CRN <i>(e.g. 10010)</i>

DECLARATION

I understand that although there are advantages to designating a course credit/non-credit, it's best to understand the credit/non-credit policy in the Academic Calendar to fully understand the effects of designating a course credit/non-credit on my transcript and future educational decisions. I will read the Credit/Non-Credit policy in the [Academic Calendar - Academic Regulations, Policies, and Program Requirements](#).

Once complete, please save this form and attach it to an email addressed to student.records@uleth.ca from your '@uleth.ca' email address or submit a paper copy to the Lethbridge Registrar's Office (SU140) or the Calgary Campus Office (S6032).

_____ *Student signature required if submitting paper copy*

_____ *Date*

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