

Office of the Registrar

3377 Bayview Avenue, Toronto, ON, M2M 3S4

Tel: 416.226.6620 ext.6711 • Fax: 416.226.4210

 Email: registration@tyndale.ca • Webpage: www.tyndale.ca/registrar

- A supplemental form, available at the Office of the Registrar, is also required for the following program:
MDiv Counselling.

Full legal name: _____ Student ID: _____

Email: _____ Daytime Phone: _____

 *If your mailing address has changed, please see www.tyndale.ca/registrar/update-info.

	Current Program	Requested Program
Degree		
Major(s)		
Concentration(s)		

Reason: _____

STUDENT'S SIGNATURE:	Date:
Signature from Student Financial Services (for government loan recipients only)	Date:

It is the responsibility of the student to secure all signatures.
OFFICE OF THE REGISTRAR'S USE ONLY:

Approved		Date:
J1 updated		Date:
Notified		Date:
Spreadsheet Updated		Date:
Received on		Received By:
		Hold(s):