



Masters of Community and Regional Planning (MCRP) Program Record Year 1 Term 2

- Instructions
- Indicate or list all courses you are registered in for Year 1 Term 2.
 - SCARP recommends that students take between 12 and 15 credits per term.
 - Submit a signed Program Record to the [Graduate Administrator](#) by the end of January.
 - **Students should keep a copy of this form for their records.**

STUDENT INFORMATION				
Student Name		Student Number		
Faculty Advisor Name		Entry Year		
Concentration				
REQUIRED COURSES				
<input type="checkbox"/>	PLAN 509	Urbanism as a Global Way of Life	2	
<input type="checkbox"/>	PLAN 522	Qualitative Data Collection and Analysis	2	
<input type="checkbox"/>	PLAN 524	Legal Concepts for Professional Planning	2	
<i>Total Credits</i>				6
ADDITIONAL COURSES				
Course Code	Course Title	Part of Concentration?		Credits
		<input type="checkbox"/> Y	<input type="checkbox"/> N	
		<input type="checkbox"/> Y	<input type="checkbox"/> N	
		<input type="checkbox"/> Y	<input type="checkbox"/> N	
<i>Total Credits</i>				
EXEMPTIONS	Exemptions from required courses must be fully justified and accompanied by a Request for Course Exemption form in addition to required approvals from the course instructor, faculty advisor, and MCRP Chair. Course exemptions do not reduce the total credits required to earn your degree. Another suitable course must be substituted.			
AUDIT	Students may audit courses with approval of the Instructor, Faculty Advisor, and Masters Chair. Courses taken for audit are not counted towards degree requirements, but appear on transcripts. Change of Registration form must be submitted to the Graduate Administrator.			
INTERNSHIP	Internships are usually taken in Y1 Summer. Students are permitted to start an internship following the successful completion of Y1T1.			
<input type="checkbox"/>	PLAN 527A	Internship	<i>Expected Start Date:</i>	<i>Expected End Date:</i>
				3

Student Affirmation:

- I have discussed the above course selections with my Faculty Advisor.

Faculty Advisor Approval:

Name (printed)

Signature

Date (yyyy/mm/dd)