

McGILL UNIVERSITY

APPLICATION FORMS FOR GEOG 398 FIELD COURSE

REGISTRATION - GEOG 398

Submit your completed application forms to Prof. Oliver Coomes (oliver.coomes@mcgill.ca) by e-mail by the [application deadline indicated on the Department website](#). Confirmations will be e-mailed to students no more than 10 days after the application deadline.

COST:

An additional fee of **\$1,004.25** will be added directly to your student fee account. This cost includes transportation by bus, accommodation and meals, but does **not** include tuition fees, or personal incidental expenses.

Cancellations for medical reasons (doctor's medical note required), will be refunded in full **except \$100.00**.

RESTRICTIONS:

1. All field courses have limited enrolment.
2. **Priority given to students in Geography Major and Honours programs.**

APPLICATION FORM - GEOG 398

**GEOG 398 - Field Studies in Human Geography: in Mont St.-Hilaire, Quebec,
August 19 – August 27, 2023 (including weekends). Instructors: Profs. Oliver Coomes and Brian
Robinson**

NAME: _____ STUDENT NO. _____

E-MAIL ADDRESS: _____ TEL. NO. () _____

CONTACT (in case of emergency): _____ TEL. NO. () _____

RELATIONSHIP WITH CONTACT PERSON: _____

Date I expect to graduate: _____(month) _____(year)

Major(s)/Minor(s): _____

Have you completed Geog 290? Yes: _____ No: _____

I will have completed _____ credits in a _____ credit degree at McGill by April 30 2023.

If you have a medical condition that may affect your participation or wellbeing during the field course, please inform Prof. Coomes as soon as possible.

Food Allergies and Preferences

Please specify any food allergies:

Please indicate if you are (tick one):

Vegetarian _____

Vegan _____

Omnivorous _____

Other (please specify): _____

REFUND POLICY

GEOG 398: FIELD STUDIES IN HUMAN GEOGRAPHY

**MONT. ST-HILAIRE, QUEBEC
AUGUST 19 – AUGUST 27, 2023 (inclusive)**

As a means of keeping the cost of running this field course as low as possible we are obliged to enforce the following policy on refunds.

I understand and accept that as a participant of this field course an additional fee of \$1,004.25 has been charged to my student fee account for this course. I also understand that only a cancellation supported by a medical note will be accepted for a reimbursement, and that a processing fee of \$100.00 will be retained.

Print Name: _____

ID: _____

E-mail
address: _____

Signature: _____

Date: _____