

AND

REFERENCE LETTER

One letter of reference from Community Elder, Clergy, or Spiritual Advisor is required for admission to the Indigenous Spiritual and Pastoral Care Diploma. (Please have reference letter sent directly to the address on next page).

LETTER OF INTENT

A brief description of yourself and why you want to take this diploma. (No longer than two typed pages)

For more information on the Diploma requirements contact Chris Wells, Director of Studies (204) 786- 9857 or ch.wells@uwinnipeg.ca

DECLARATION (please read, date, and sign)

I declare that all statements made with respect to this application are true and complete. I agree, if admitted, to comply with the regulations of The University of Winnipeg, Faculty of Theology.

Please read the following information carefully. The declaration must be signed and dated before your application can be submitted. All relevant information (including ALL reference to previous post-secondary education), supporting documentation, and the non-refundable application fee must be submitted with this application. Registration at a post-secondary institution subsequent to the submission of this application must be declared in writing.

Protection of Privacy

Personal information collected on this form will be utilized by the University of Winnipeg for admission and registration purposes. It is collected under the general authority of the *University of Winnipeg Act*, and in conformity with the *Manitoba Freedom of Information and Protection of Privacy Act*.

The information will be used to admit you as a student, register you in classes and record your grades, create your permanent student record and provide you with student privileges (library, athletics, voting in elections, counseling and health services). It will also be used for accounting and correspondence purposes related to admission and registration, and may be employed in the determination of eligibility for student awards. Information regarding graduation and awards may be made public. Elements of your personal information may also be provided to University Relations to inform you of University and community events, and for alumni contact purposes. Finally, personal information may be used to conduct research into University enrolment and related statistical profiling activities.

Your personal information is protected under the *Freedom of Information and Protection of Privacy Act*. If you have any questions about the collection and use of this information please contact:
Eric Benson, Senior Records Officer, Graduate Studies-Student Services, Room 1C16, University of Winnipeg, 515 Portage Ave, Winnipeg, MB R3B 2E9 (204) 786-9466 fax (204) 779-0961 e.benson@uwinnipeg.ca

I declare that I have read and understood the information on this application, and that all statements made with respect to this application are true and complete. I agree, if admitted, to comply with the regulations of the **University of Winnipeg**.

I consent to the disclosure of information on this application to other educational institutions to verify my statements and academic qualifications.

I understand that misrepresentation, falsification of documents, or the withholding of requested information with respect to this application can result in cancellation of the acceptance and registration, or dismissal from the University.

I accept that any information on falsified documents may be shared with the Association of Registrars of the Universities and Colleges of Canada.

I authorize my high school/university to release my academic record(s) should the need arise to accelerate the processing of this application.

Date: _____ **Signature of Applicant:** _____

Please return this form and other application documents to:

**Chris Wells, 1B03 – Faculty of Theology
515 Portage Avenue Winnipeg, Manitoba R3B 2E9**

FOR OFFICE USE ONLY:

Date Received: _____ Amount: _____ Cash Cheque

Student Number _____

Receipt #: _____

Date: _____

Initials: _____

Writing Requirement Returning to Spirit required in the first year