

# APPLICATION FOR LETTER OF PERMISSION:

Forward to:

Admissions Office  
University of Winnipeg  
515 Portage Ave  
Winnipeg, Manitoba  
R3B 2E9  
(204) 786-9159  
Fax (204) 783-1175

## Application Fee: \$60.00 (Non-refundable)

Complete this application form only after having read the attached information sheet regarding regulations and procedures. A separate application is required for each term and institution regardless of the number of courses being requested.

<p>(Please Print)</p> <p>Date: _____</p> <p>Student Number: _____</p> <p>Name: _____</p> <p>Address: _____</p> <p>_____</p> <p>_____ Postal Code: _____</p> <p>Phone No.: _____</p> <p>Email: _____</p> <p>Full Name and Address of <u>Host</u> University:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <ul style="list-style-type: none"><li>Students are permitted to transfer a maximum of <b>30 credit hours</b> of course work on Letters of Permission <b>for degree credit</b>.</li><li>We require a <u>minimum</u> of 10 working days for institutions inside Manitoba and 15 working days for institutions outside Manitoba to process this request.</li></ul>	<p>In which equivalent U of W term do you wish to register? Please Check One:</p> <p><input type="checkbox"/> Fall <u>20</u> (September to December)</p> <p><input type="checkbox"/> Winter <u>20</u> (January to April)</p> <p><input type="checkbox"/> Spring <u>20</u> (May-August)</p> <p>For how many courses do you wish to register? _____</p> <p>Will you be applying to graduate following completion of this academic term? Graduation Date?</p> <p><input type="checkbox"/> Yes June <u>20</u> or October <u>20</u></p> <p><input type="checkbox"/> No</p> <p>What degree or program are you pursuing?</p> <p><input type="checkbox"/> BA (3-yr) <input type="checkbox"/> BA (4-yr) <input type="checkbox"/> BEd</p> <p><input type="checkbox"/> BSc (3-yr) <input type="checkbox"/> BSc (4-yr) <input type="checkbox"/> BA/BSc (Honours)</p> <p><input type="checkbox"/> BBA (3-yr) <input type="checkbox"/> BBA (4-yr)</p> <p>Major: _____</p> <p><input type="checkbox"/> Pre-Professional: _____</p> <p>Have you previously requested a Letter of Permission for this term? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Letter of Permission to be:</p> <p><input type="checkbox"/> Picked Up <input type="checkbox"/> Mailed <input type="checkbox"/> Faxed*/Mailed</p> <p>(*There is a \$5.00 fee for out-of-province faxing)</p> <p>Host University Fax No.: _____</p>
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## Eligible for a Letter of Permission?

- Have you completed a minimum of 18 credit hours at the University of Winnipeg. This also applies to **Transfer Students**.
- You are a **Regular** status student with a GPA of at least 2.0 (C). (Students on Mature, Conditional, Probation or Concurrent status are not eligible for a Letter of Permission.)
- You are pursuing a degree or pre-professional program **at the University of Winnipeg** and are requesting permission to take courses **acceptable for credit in a U of W degree program**.

## Please Note:

- If the Host University is OUTSIDE Manitoba, course outlines are required for each course listed.
- Written permission from the appropriate department chairperson is required for courses listed which are to be used for your MAJOR or HONOURS program.**

Date: \_\_\_\_\_, 20\_\_\_\_ Signature of Applicant: \_\_\_\_\_

List all courses to be completed at host University and indicate credit weight (e.g., 3, 6). Circle A (Add) or D (Delete) for new course or to remove courses from previously requested Letters of Permission.

1. Dept/Course No. \_\_\_\_\_ A/D

Title \_\_\_\_\_

\_\_\_\_\_ Credit Hrs: \_\_\_\_\_

2. Dept/Course No. \_\_\_\_\_ A/D

Title \_\_\_\_\_

\_\_\_\_\_ Credit Hrs: \_\_\_\_\_

3. Dept/Course No. \_\_\_\_\_ A/D

Title \_\_\_\_\_

\_\_\_\_\_ Credit Hrs: \_\_\_\_\_

4. Dept/Course No. \_\_\_\_\_ A/D

Title \_\_\_\_\_

\_\_\_\_\_ Credit Hrs: \_\_\_\_\_

5. Dept/Course No. \_\_\_\_\_ A/D

Title \_\_\_\_\_

\_\_\_\_\_ Credit Hrs: \_\_\_\_\_

6. Dept/Course No. \_\_\_\_\_ A/D

Title \_\_\_\_\_

\_\_\_\_\_ Credit Hrs: \_\_\_\_\_

University of Winnipeg Equivalent(s)

(For Office / Department use only)

1. \_\_\_\_\_

\_\_\_\_\_

2. \_\_\_\_\_

\_\_\_\_\_

3. \_\_\_\_\_

\_\_\_\_\_

4. \_\_\_\_\_

\_\_\_\_\_

5. \_\_\_\_\_

\_\_\_\_\_

6. \_\_\_\_\_

\_\_\_\_\_

**Permission Granted  
(For Department use only)**

☐ Approved for major credit. The above course(s) is/are approved for credit in the major. Transfer equivalents are listed.

☐ Permission granted for Honours Courses. Transfer equivalents are listed.

☐ Approved for credit in the BEd degree Program.

☐ Permission granted for Masters Courses. Transfer equivalents are listed.

Signature (Dept. Chair) \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Comments (For Office Use only.)

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_

Date Approved: \_\_\_\_\_

Approved By: \_\_\_\_\_

Receipt #: \_\_\_\_\_

Current Status: \_\_\_\_\_