



THE UNIVERSITY OF
WINNIPEG

Faculty of
Graduate Studies

The University of Winnipeg Graduate Studies Scholarships Nomination Form

Deadline to Submit to Graduate Studies: March 31st (or next business day)

Last Name of Applicant		First Name	Initial of all given names
ADDRESSES			
Current address (street name & number/City/Province/Postal Code)		Permanent mailing address (if different than current address) (street name & number/City/Province/Postal Code)	
If current address is temporary, indicate leaving date		Telephone number at permanent mailing address	
Telephone number	Alternate phone number	E-mail address	
U of W student #	Department	Institution	
CITIZENSHIP			
<input type="checkbox"/>		<input type="checkbox"/>	
Canadian Citizen		Permanent Resident of Canada	
		<input type="checkbox"/>	
		Visa Student	
Undergraduate GPA (in approx. last 60 credit hours of study):	Graduate GPA (if applicable):	Please do not recommend candidates whose GPA for the last 60 credit hours of study is below 3.75. Applicants with a GPA below 3.75 will not be considered by the Awards Committee.	
Among the _____ students from this department who are recommended, this student ranks _____			
This student will be in the _____ year of the _____ Master's program as of September 1 and is expected to complete all degree requirements by _____.			
SIGNATURE			
Name of Graduate Program Chair/Coordinator		Department	
Signature		Date	
TRANSCRIPTS			
Please check all that apply:			
<input type="checkbox"/> See transcript submitted with admissions application		<input type="checkbox"/> Transcript/Marks statement attached	

PROGRAM APPRAISAL

Last Name of Applicant

First Name

TO BE COMPLETED BY THE GRADUATE PROGRAM CHAIR/COORDINATOR: *Discuss the merit of the student with regard to community service and academic excellence, how the student rates in comparison to his/her peers, and provide information you feel is pertinent to the assessment of this student. Use the criteria provided in The UWGSS Regulations and Nomination Procedures Guide.*

Completed By

Last Name of Applicant	First Name
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PLAN OF STUDY/RESEARCH PROPOSAL

Copied From

Current year admissions application Provided by student Other: