



# Graduate Studies Registration Form

CHECK TERM YOU ARE REGISTERING FOR:  FALL (Sept.—Dec.)  WINTER (Jan.—Apr.)  SPRING (May—Aug) YEAR \_\_\_\_\_

SURNAME (LEGAL ONLY)													DATE OF BIRTH (Yr/Mo/Day)	STUDENT NUMBER
GIVEN NAMES														

Please Print with Pen

Permanent Home Address \_\_\_\_\_

Mailing Address \_\_\_\_\_

Next of Kin Address \_\_\_\_\_

Former Name (if applicable) \_\_\_\_\_

DEGREE SOUGHT  MMFT  MA Ind St  MA CS  MA Econ  MSc BioSci  MSc ACS  MA Theo  DIPL Ind SP  M Div  STM  MDP

STATUS  Full-Time  Part-Time  Continuing  Occasional

ARE YOU A SPONSORED STUDENT? (Someone else is paying your fees)  YES  NO

Name of Sponsor \_\_\_\_\_

TERM OF LAST OR CURRENT REGISTRATION AT THE UNIVERSITY: TERM (FALL, WINTER, SPRING) \_\_\_\_\_ YEAR \_\_\_\_\_

**Indicate your course selections in order of preference. List the most important first (i.e. , 1. Preferred, 2. Preferred, 3. Preferred etc.) then fill in your alternate selection for each preferred course in the space marked "ALT." below the preferred course. In the event that enrolment for that course exceeds the limit, your alternative choice for that course will be considered. Failure to select an alternative may result in your being assigned no course at all.**

Entry No.	COURSE NUMBER (10 digits) e.g. GBIO-7111-001	TERM F, W, FW,SS	COURSE TITLE e.g. Curr Top Gen Genom	SLOT/DAY(S)	TIME(S)	EXAM DATE	Lab Section No. (If Applicable)
1	PREF.						
	ALT.						
2	PREF.						
	ALT.						
3	PREF.						
	ALT.						
4	PREF.						
	ALT.						
5	PREF.						
	ALT.						
6	PREF.						
	ALT.						
7	PREF.						
	ALT.						
8	PREF.						
	ALT.						
9	PREF.						
	ALT.						
10	PREF.						
	ALT.						
11	PREF.						
	ALT.						

**IMPORTANT**

- 1) It is the student's responsibility to become familiar with the University's academic regulations and policies regarding fees and/or withdrawal procedures as specified in the current calendar.
- 2) Fee statements are not mailed out via hard copy. It is the responsibility of the student to view WebAdvisor for all fees that are outstanding as well as applicable due dates. Fees not paid by due dates will be subject to applicable late fees. Please contact Grad Studies – Student Services if any enquiries.

I hereby agree to honour all financial and academic obligations in accordance with the University of Winnipeg policies and have read the Freedom of Information and Protection of Privacy Act (FIPPA) statement on the back of this form.

DATE \_\_\_\_\_

PROGRAM ADVISOR'S SIGNATURE \_\_\_\_\_

STUDENT'S SIGNATURE \_\_\_\_\_

GRADUATE PROGRAM COMMITTEE CHAIR'S SIGNATURE \_\_\_\_\_

## **THE MANITOBA FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT (FIPPA) STATEMENT**

Personal information collected on this form will be utilized by the University of Winnipeg for registration purposes. It is collected under the general authority of The University of Winnipeg Act, in conformity with, and protected under, the Manitoba Freedom of Information and Protection of Privacy Act. The information will be used to register you in classes and record your grades, create your permanent student record, and to provide you with student privileges (library, athletics, voting in elections, counselling and health services). It will also be used for accounting and correspondence purposes related to 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 Advancement Services/University of Winnipeg Foundation 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 (FIPPA). If you have any questions about the collection and the use of this information please contact:

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