## Thesis/Practicum Writing Term Required Application Form

## Graduate Studies, Office of the Registrar / The University of Winnipeg

515 Portage Ave / Wpg., MB / R3B 2E9 / (204) 786 - 9466

fax: (204) 779 - 0961 / email: e.benson@uwinnipeg.ca / website: http://www.uwinnipeg.ca/index/grad-studies-programs

This form **MUST** be completed if a "Thesis/Practicum Writing Term" is required in order to complete your degree. This term is only activated once **ALL PROGRAM COURSE** requirements are complete and is **NOT** part of your "Continuance" term(s).

## Please return completed form to the Graduate Studies Office

Note: this completed form must be returned by the end of the add/drop period for applicable term or late fees will be applied

	Student Number:	Term Last Attended:
Address:	City:	Postal Code:
Email:	Primary Phone Number: ()	Secondary Phone Number ()
Birth Date (M/D/Y):		
☐ Master of Art ☐ Master of Art ☐ Master of Sci	g Term	
	pril)	
	mission of the	Graduate Studies Program to take one
"Thesis/Practicum Writing Term"		<u> </u>
"Thesis/Practicum Writing Term'  Date:  I declare that I have answered	'to complete his/her degree requirements.  Signature of Graduate Studies Program Cha all questions correctly and understand that misinform	úr:
Date:I declare that I have answered "Thesis/Practicum Writing Te	'to complete his/her degree requirements.  Signature of Graduate Studies Program Cha all questions correctly and understand that misinform	nir:nation may invalidate this request for a
"Thesis/Practicum Writing Term"  Date:  I declare that I have answered  "Thesis/Practicum Writing Te	'to complete his/her degree requirements.  Signature of Graduate Studies Program Cha all questions correctly and understand that misinform rm'.	nation may invalidate this request for a

Once all signatures are complete, return form to the Office of the Registrar for processing.