



THE UNIVERSITY OF
WINNIPEG

Request to Receive Degree in Absentia

Student Number: _____

Date: _____

Name: _____

Address: _____

City _____ Postal Code: _____

E-mail _____ Telephone Number: _____

Degree (B.A., B.Sc. Hon., 4 yr. etc): _____

Expected Grad Date (Check one):

Spring (June)

Fall (October)

Winter (February) in Absentia only*

*Winter (February) Graduands ONLY: will you be participating in the June Ceremony? (Y/N) ____

Please check one:

☐ I will pick-up degree at Student Central

☐ Mail to address indicated below:

*This form is not an application for graduation; students must apply to graduate online using their WebAdvisor account. Please save this form – **using your full name and student number as the file name** – and e-mail it to convocation@uwinnipeg.ca or complete the form in-person at Student Central.*