

Application for Exchange Student Admission

ENROLMENT SERVICES/ADMISSIONS • 424 University Centre • Winnipeg, Manitoba • Canada R3T 2N2 • Telephone: (204) 474-8808 • FAX (204) 474-7554

Please check one:

- ☐ **Undergraduate Courses** (1000 to 5000 level)
☐ **Graduate Courses** (6000 level & higher)

Application deadlines:

- April 1** for September start date
September 1 for January start date
January 1 for May/June or July start date

If you are applying to the **Asper school of Business**, return completed application to:

Student Exchange Coordinator
Asper School of Business
 268 Drake Centre
 The University of Manitoba
 Winnipeg, Manitoba R3T 2N2
 Canada

Fax: 1-204-474-7529

If you are applying to **any other faculty**, return completed applications to:

Student Exchange Coordinator
International Centre for Students
 541 University Centre
 The University of Manitoba
 Winnipeg, Manitoba R3T 2N2
 Canada

Fax: 1-204-474-7562

1 Previous application

Please print

Have you **ever applied** for admission to the University of Manitoba?

- ☐ Yes ☐ No If 'yes', Faculty and year of application:

Faculty: _____ Year: | _ | _ | _ | _ |

If 'yes' did you register and attend classes?

- ☐ Yes; year last registered: | _ | _ | _ | _ | ☐ No

U of M student number (if known): | _ | _ | _ | _ | _ | _ | _ |

2 Date and duration of program

Indicate your preferred start session:

- ☐ Regular Session: September to December 20____
☐ Regular Session: January to April 20____
☐ Intersession: May and June 20____
☐ Summer Session: July and August 20____

Anticipated end date of program:

Month _____ Year _____

3 Personal information

Family name	
First name and middle name(s). Use full legal names (no initials).	
Previous or other names	
Date of birth (year/month/day)	Place of birth (province or country)
Country of permanent residence	Title (Mr., Miss, Ms, Mrs., Dr., Rev.)
Gender: Male ____ Female ____	Citizenship

Citizenship and immigration status *You must check one box.*

- ☐ Canadian Citizen Date of entry if not born in Canada: | _ | _ | _ | _ |
 Year Month
☐ Permanent Resident Date of entry: | _ | _ | _ | _ |
 Year Month
☐ International student on Student Authorization (Student Visa)
 Date of actual or proposed entry into Canada: | _ | _ | _ | _ |
 Year Month
 Passport Number: _____

4 Primary language

(primary language refers to the mother tongue)

- ☐ English ☐ French ☐ Other (specify): _____

If English was not your first language, indicate the number of years of English instruction you have received: _____

If you have written any of the following: T.O.E.F.L., CanTEST, M.E.L.A.B., I.E.L.T.S., enter the name and date of last writing or date it is to be written.

Test: _____ Date written: _____

5 Mailing addresses

Current Mailing address valid until _____

Post office box or number and street	
City or town and province	
Country	Postal code
Home telephone ()	Facsimile ()
E-mail:	

Permanent home address (if different from above)

Post office box or number and street	
City or town and province	
Country	Postal code
Home telephone ()	Facsimile ()

Emergency Contact Person

Name	
Relationship	Home telephone ()
Email Address	

6. Academic History

Please provide a complete listing of all post-secondary institutions you have attended or are attending. Please attach additional sheet if required.

University or college:

Name of Institution	Location	From	To	Program in which you were enrolled (e.g. B.A., B. Sc., etc.)	Major Subject	Degree Conferred	
		Yr. / Mo.	Yr. / Mo.			Yes / Date	No / highest level completed
Current:		/	/				
Previous:		/	/				
		/	/				

7. Home Institution Exchange Approval Name of home institution: _____

Choose one:	
<input type="checkbox"/> Bilateral Exchange	<input type="checkbox"/> Consortium Exchange
This student has been selected according to the terms of the Student Agreement between the University listed above and the University of Manitoba and is nominated for exchange student admission under the terms of this agreement	<p>This student is applying to the UofM through its participation in this exchange consortium.</p> <p>Check one:</p> <p><input type="checkbox"/> CONAHEC <input type="checkbox"/> North2North <input type="checkbox"/> RAMP <input type="checkbox"/> IBSEN</p> <p><input type="checkbox"/> Mobility project through faculty of: _____</p> <p><input type="checkbox"/> Other: _____</p>
Exchange Coordinator's name (please print):	
Exchange Coordinator's signature:	
Exchange Coordinator's email:	Date:

8. Study plan

List the courses you plan to take while at the University of Manitoba. Please ensure that you have the prerequisites for the courses you select and that they are offered in the correct semester for the time you will be here. List courses in preferred order (3 to 5 courses per semester). Course information can be found in the *University of Manitoba Calendar* on the internet at <http://webapps.cc.umanitoba.ca/calendar> The *Registration Guide* is also on the internet. (If you are applying before the next session's *Calendar* and *Registration Guide* are on the website, please use the previous year's as a guideline.) Please attached a separate sheet if more space is required.

[illegible]

9. Home Institution Faculty Approval

(To be completed by the Dean of your Faculty, Registrar or Equivalent officer):

I confirm that the above applicant is currently a student in good standing at this institution and has been permitted to take the courses listed above at the University of Manitoba as part of their degree program.

Name (please print): _____ Position: _____ Faculty: _____ Date: _____

This student is currently enrolled in the following degree program at their home institution: _____

Signature: _____

10. Declaration

Please read all application materials carefully. Failure to disclose relevant facts (including ALL previous attendance at post-secondary institutions) and/or submission of false information or documentation may result in acceptance and registration being withdrawn. If this information is discovered in a subsequent session it may result in dismissal from the University. Registration at a post-secondary institution subsequent to the submission of this application must be declared in writing.

Freedom of Information and Protection of Privacy Act

This personal information is being collected under the authority of The University of Manitoba Act. It will be used for the purposes of admission, registration, assessment of academic status, and communication with the student. It may be disclosed to other educational institutions, government departments, and co-sponsoring organizations, and, for those students who are members of UMSU, it will be disclosed to the University of Manitoba Students' Union. Upon graduation, the student's name and address, together with information on degrees, diplomas, and certificates earned will be given to and maintained by the alumni records department in order to assist the University's advancement and development efforts. Information regarding graduation and awards may be made public. It is protected by the Protection of Privacy provisions of The Freedom of Information and Protection of Privacy Act. If you have any questions about the collection of personal information, contact the FIPPA/PIA Coordinator's Office (tel. 204-474-8339), University of Manitoba Archives & Special Collections, 331 Elizabeth Dafoe Library, Winnipeg, Manitoba, Canada, R3T 2N2.

If you wish to authorize another person to access your information on your behalf, please complete the FIPPA release form available from our office or on our website.

Date: _____

Notice Regarding Disclosure of Personal Information to Statistics Canada

The Federal *Statistics Act* provides the legal authority for Statistics Canada to obtain access to personal information held by educational institutions. The information may be used only for statistical purposes, and the confidentiality provisions of the *Statistics Act* prevent the information from being released in any way that would identify a student.

At any time, students who do not wish to have their information used are able to ask Statistics Canada to remove their identifying information from the national database.

Further details on the use of this information can be obtained from Statistics Canada's web site: <http://www.statcan.ca> or by writing to the Post-Secondary Section, Centre for Education Statistics, 17th Floor, R.H. Coats Building, Tunney's Pasture, Ottawa, Ontario, Canada, K1A 0T6.

Transcript Release

- I hereby authorize the release of my University of Manitoba transcript to the University of Manitoba Student Exchange Coordinator, in order that it may be sent directly to my home institution.

Declaration

- I hereby certify that I have read and understood the instructions and information on this application form and on the *Application Guide* and that all statements made in connection with this application are true and complete.
- I authorize the University to verify any information, transcripts, or reference letters provided as part of this application.
- I accept that any information on falsified documents may be shared with the Association of Registrars of the Universities and Colleges of Canada.

Student's signature _____

11. Required Documentation

- **Official transcripts.** You must arrange to have official transcripts forwarded along with the application form to the International Centre for Students Office. Student copies or photocopies are not acceptable. Transcripts become the property of U of M and will not be returned.
- **Name change documentation.** If your name has changed as a result of marriage, divorce or other reason, appropriate documentation must be supplied.
- **English language proficiency.** If your primary language is other than English, you must demonstrate that you are proficient in the use of the English language. This includes Canadian Citizens & Permanent Residents and applicants on Student Authorization (Visa). A brochure with detailed information on English language proficiency may be obtained from our office.

FOR OFFICE USE ONLY

University of Manitoba Faculty/Department approval:

This student has been approved to study in the Faculty of _____ as an exchange student.

Approval granted by (please print)

Name: _____

Title: _____

Signature: _____

Date: _____

For Graduate Student Applicants:

This student has been approved to study in the Department of _____ as an exchange student.

Approval granted by (please print)

Name: _____

Title: _____

Signature: _____

Date: _____