**REGISTRATION FORM:**

**II S IN PSYCHOLOGY**

Regular Session 20__ – 20__ / Summer Session 20__

(Revised: May 2014)

Name (print): _____________________________________________ Student Number: ______________________

U of M email: ___________________________________________ Area: _______________________________

Street Address: ___________________________________________________________________________

City: ___________________________________________ Postal Code: _________________________

Preferred Phone: _____________________________ Alternate Phone: ______________________

Full-Time: ____________ Part-Time: ____________

**Note:** Students may not retain the status of full-time while employed full-time without prior permission of the Dean of Faculty Studies and recommendation from the major department. Psychology students who have handed their PhD thesis into the Faculty of Graduate Studies for distribution to committee members must register as part-time. Students registering for part-time must complete a Request for Part-Time Status form and submit it to the Psychology Graduate Office. Link: http://www.umanitoba.ca/faculties/graduate_studies/media/Request_PT_Status.pdf

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<th>Course No.</th>
<th>Aurora CRN</th>
<th>Course Name</th>
<th>Section</th>
<th>Term FW/S</th>
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**SIGNATURES:**

Student: _____________________________________________ Date: ______________________

Home Department Advisor: __________________________________ Date: ______________________

Graduate Chair or designate: _____________________________ Date: ______________________

Revised September 2013