

The University of Manitoba  
Faculty of Arts

**INTENTION TO GRADUATE**

**A. THIS SECTION TO BE COMPLETED BY THE STUDENT**

STUDENT NAME: \_\_\_\_\_ STUDENT NO.: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

**(Check one)**

I, wish to GRADUATE IN:

I, do not wish to GRADUATE IN:

FEBRUARY  20\_\_\_\_\_

FEBRUARY  20\_\_\_\_\_

MAY  20\_\_\_\_\_

MAY  20\_\_\_\_\_

OCTOBER  20\_\_\_\_\_

OCTOBER  20\_\_\_\_\_

***Degree Sought (check one)***

B.A. GENERAL

B.A. ADVANCED

B.A. HONOURS

MAJOR/HONS.1: \_\_\_\_\_ MINOR/HONS. 2: \_\_\_\_\_

DATE: \_\_\_\_\_ STUDENT SIGNATURE: \_\_\_\_\_

Statement of Purpose: This personal information is being collected under the authority of the University of Manitoba Act and will be used to advise the Registrar's Office to add or to remove a student from the Faculty of Arts list of prospective graduates. 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, contact the FIPPA Coordinator's Office (204) 474-8339, c/o Archives and Special Collections, 331 Dafoe Library, University of Manitoba, R3T 2N2.

**B. THIS SECTION TO BE COMPLETED BY THE DEAN'S OFFICE STAFF**

ACTION TAKEN: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

DATE: \_\_\_\_\_ DEAN'S REPRESENTATIVE: \_\_\_\_\_