Application for Exchange Student Admission

1 Previous application

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  
- 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): __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ _
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.

<table>
<thead>
<tr>
<th>Name of Institution</th>
<th>Location</th>
<th>From Yr. / Mo.</th>
<th>To Yr. / Mo.</th>
<th>Program in which you were enrolled (e.g. B.A., B. Sc., etc.)</th>
<th>Major Subject</th>
<th>Degree Conferred</th>
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<td>Yes / Date</td>
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7. 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 below at the University of Manitoba as part of their degree program.

Name: _________________________  Position: _________________________  Faculty: _________________________  Date: _______________ 

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

8. Home Institution Exchange Coordinator Approval

This student has been selected according to the terms of the Student Exchange Agreement between this university and the University of Manitoba and is nominated for exchange student admission under the terms of this agreement.

Exchange coordinator's name (please print): _________________________

Exchange coordinator's signature: _________________________  Date: _______________

9. 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.)

<table>
<thead>
<tr>
<th>U of M Course Code</th>
<th>Course Title/Description</th>
<th>Course Dates</th>
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11. 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/PHIA 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: ________________________

Student’s signature ____________________________

12. 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.

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**FOR OFFICE USE ONLY**

**University of Manitoba Faculty 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: __________________________