

# STUDENT SERVICES

## Request for Transfer Credit Form

Submit to your Student Advisor, c/o Extended Education, 185 Extended Education Complex, University of Manitoba, Winnipeg, MB R3T 2N2.  
Please contact the Student Advisor to verify documentation required before submitting this form.

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

Last Name: \_\_\_\_\_ First (Given) Name: \_\_\_\_\_  
 Student Number: \_\_\_\_\_ Date of Birth (yy/mm/dd): \_\_\_\_\_

**Credit requested to University of Manitoba based on:**

1

From institution:	For U of M program:
Course Title:	Course Title:
Course Number:                      Grade:                      Hours:	Course Number:                      Hours:

2

From institution:	For U of M program:
Course Title:	Course Title:
Course Number:                      Grade:                      Hours:	Course Number:                      Hours:

3

From institution:	For U of M program:
Course Title:	Course Title:
Course Number:                      Grade:                      Hours:	Course Number:                      Hours:

4

From institution:	For U of M program:
Course Title:	Course Title:
Course Number:                      Grade:                      Hours:	Course Number:                      Hours:

5

From institution:	For U of M program:
Course Title:	Course Title:
Course Number:                      Grade:                      Hours:	Course Number:                      Hours:

**Please ensure you have met the following requirements as laid out on the website. Also include all required documentation with your request:**  
**I authorize access to my University of Manitoba transcript**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Your personal information is being collected under the authority of *The University of Manitoba Act*. The information you provide will be used by the University for the purpose of assessing the applicant's eligibility for a course credit in a certificate program. Your personal information will not be used or disclosed for other purposes, unless permitted by *The Freedom of Information and Protection of Privacy Act* (FIPPA). If you have any questions about the collection of your personal information, contact the Access & Privacy Office (tel. 204-474-9462), 233 Elizabeth Dafoe Library, University of Manitoba, Winnipeg, MB, R3T 2N2.

**METHOD OF PAYMENT:**

For CIM transfers, challenge, seminar study or prior learning. Please indicate type of payment. All applicable fees must accompany this form.

Debit – In-person only.                      Cheque/Money Order – Payable to the University of Manitoba (post-dated cheques can not be accepted).  
 Payment by credit card – Complete the following section.                      Visa                      MasterCard

Credit card number: \_\_\_\_\_ CVC (Card Verification Code): \_\_\_\_\_ Expiry date: \_\_\_\_\_  
 Card holder's name (as it appears on the card): \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Authorizing signature: \_\_\_\_\_

