



## INDIGENOUS / ABORIGINAL STATUS

Are you an Indigenous Person from Canada or the United States?

Check (✓) One.  YES  NO

If "YES" are you:  CDN Status First Nation  Inuit  Métis

CDN Non-Status First Nation  American Indian (registered or non-registered)

For more information on Indigenous / Aboriginal programs and student services, please visit: [umanitoba.ca/student/asc](http://umanitoba.ca/student/asc)

## PROGRAM CHOICE

Program Faculty of Dentistry (DMD) Campus: Bannatyne (Main Campus)

Starting Term: Fall (August) Year 2012 Registration: Full Time

Information in this section is collected to assist the University in meeting its commitment to recruit and retain Aboriginal students from Canada and the United States. This declaration will also be used by the Financial Aid & Awards Office for awards selection purposes. The declaration is voluntary, except where special consideration is requested based on Aboriginal identity. An Aboriginal person is a member of a Canadian First Nation, Métis or Inuit community or is an American Indian. Canadian First Nation or American Indian includes 'Status,' 'Treaty,' or 'Registered' Indians as well as 'Non-Status,' and 'Non-Registered' Indians. The University of Manitoba is committed to the principle of merit and to the equitable participation and success of under-represented groups such as women, Aboriginal peoples, members of visible minority groups, persons with disabilities and persons who traditionally have not had the opportunity for university studies because of economic, social, cultural reasons, lack of formal education or residence in remote areas.

**APPLICANT TYPE** CHECK (✓) one:

- Regular Student  
 Canadian Aboriginal Student  
 Special Consideration Student  
 Professional Program Transfer Student

## FACULTY SPECIFIC INFORMATION

Do you understand that you must also complete and return the Supplementary Application by the January 20, 2012 deadline?  Yes I understand and will comply (You can download this form at [www.umanitoba.ca/admissions/media/dentistry\\_supplemental.pdf](http://www.umanitoba.ca/admissions/media/dentistry_supplemental.pdf))

Which D.A.T. scores you will be releasing to the UofM? (The D.A.T.'s must have been taken between February 2009 and February 2012. Please indicated (year/month below)

Year: |\_|\_|\_|\_|\_| Month: |\_|\_|\_|\_|\_| Year: |\_|\_|\_|\_|\_| Month: |\_|\_|\_|\_|\_|

Year: |\_|\_|\_|\_|\_| Month: |\_|\_|\_|\_|\_| Year: |\_|\_|\_|\_|\_| Month: |\_|\_|\_|\_|\_|

Will you have written the D.A.T. by November 2011?

Yes I will have written the D.A.T. by November 2011

No I will not have written the D.A.T. by November 2011

## PRIMARY LANGUAGE AND ENGLISH LANGUAGE TESTS

What is your primary language? Check (✓) one:

English  French

Other (specify): \_\_\_\_\_

If English is not your primary language, indicate the number of years of English instruction you have received: \_\_\_\_\_ years.

If you have written any of the following, enter the **name and date** of last writing or date it is to be written: CAEL, CanTEST, IELTS, MELAB, PEARSON or TOEFL.

Test	Year	Month	Other Test(s)	Year	Month

## PREVIOUS AND CURRENT EDUCATION

**A complete listing of high school and university or college education is required.** If you attend any institution subsequent to submitting this form, notify the Admissions Office immediately. Complete, official transcripts must be submitted for all universities/colleges regardless of number of courses completed or dates attended (U of M transcripts are not required).

Have you **EVER** attended university or college? Check (✓) one.

Yes; complete **Section A, B, & C**

No; go to **Section C**

### A. University or College: CURRENT ATTENDANCE

Date Classes Start	Date Classes End	Name of Institution	Province/State (Country if outside Canada/USA)	Program	Number of courses attempted in 2011-2012 Full Courses Half Courses	Highest level or degree completed (with grad date)
Year / Month  _  /  _	Year / Month  _  /  _					

### B. University or College: PREVIOUS ATTENDANCE

Date Classes Start	Date Classes End	Name of Institution	Province/State (Country if outside Canada/USA)	Program	Courses Total All Years	Highest level or degree completed (with grad date)
Year / Month  _  /  _	Year / Month  _  /  _					
Year / Month  _  /  _	Year / Month  _  /  _					

### C. High School(s) Attended (List all high schools attended in which you received credit for senior level subjects)

Date Classes Start	Date Classes End	Name of School	Province/State (Country if outside Canada/USA)	Date Completed Year / Month	Certificate Obtained (if any)
Year / Month  _  /  _	Year / Month  _  /  _				

Please check if you completed your high school requirements in any of the following programs:

- International Baccalaureate  Advanced Placement  Home Schooling  French Immersion  Programme Français

**NOTICE AND DECLARATION**

All applicants are advised to 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.

**The Freedom of Information and Protection of Privacy Act (FIPPA)**

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 used for administrative research in support of provision of education and general administration of the University. 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. Personal information will not be used or disclosed for other purposes, unless permitted by FIPPA. 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 personal information on your behalf, you must provide written authorization. Consent forms are available from the Admissions Office or our website.

**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 information on the use of this information can be obtained from Statistics Canada's website (statcan.gc.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.

**DECLARATION**

- I hereby certify that I have read and understood the instructions and information on this application form and on the Application Guide or Applicant Information Bulletin and that all statements made in connection with this application are true and complete.
- I understand that the application fee submitted with this form is non-refundable and not credited towards the tuition fees.
- 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.
- I authorize my high school/university to release my academic record/s should the need arise to accelerate the processing of this application.

SIGNATURE OF APPLICANT \_\_\_\_\_

DATE \_\_\_\_\_

