



Continuance Application

All former students who previously attended The University of Winnipeg one or more years ago must apply for re-admission. Please note: if you are a returning International student, you must complete the full application online.

Deadlines: It is recommended that students apply at least two months before the start of the term so that the application can be processed in time to allow for course registration. The recommended dates to apply are:

Term	Term Dates	Recommended Deadline
Fall	September - December	July 1
Winter	January - April	November 1
Spring/Summer	May - August	March 1

Application Fee: \$50

STUDENT DETAILS					
Student Name					
UW Student Number (if known)	Date of Birth				
Mailing Address	Email Address				
	Home Phone Number				
	Cell Phone Number				

ACADEMIC DETAILS				
Which term do you wish to resume your studies?	0 0	Fall (September) Winter (January) Spring (May)		
What degree are you seeking? (To apply to the After-Degree BEd or to transfer into the Faculty of Education, complete the online application, not this form.)	0 0 0	BA O BSC BBA O BKin (4-Yr) Joint Program O BPHE Visiting Student (Letter of Permission (LOP). Credit to be transferred to another school)		
What is your intended major/program? (i.e. Geography, Biology, etc.)				
Is your request for reinstatement because of suspension or forfeit?	0	After a suspension (call Academic Advising 204-779-8946 before submitting this form) Forfeit of previous credit (attached a letter requesting forfeit of credit) Neither		

POST-SECONDARY COURSE W	VORK							
Have you registered, or are you currently registered, at another college or university since last attending The University of Winnipeg?					o Yes o No			
If yes, please list the schools you have Please attach an up-to-date official traceourse outlines, if needed.	•	_						
Name of Institution(s)	Dates of Attendance	Degree/Diploma/C Earned		tificate	Graduation Date			
NAME CHANGE								
Is your name different than what we r	may have on file or v	vhat						
Is your name different than what we may have on file, or wha appears on any official transcripts you are submitting?			o Yes o No					
If yes, please submit official governm	ent proof of the nam	e change.						
Previous Name								
	nake payment in sev ash/Interac at Studer ayable to <i>The Univer</i>	nt Central (1		Centre)				
	put information belov			rge your	card \$50.			
Name on Card Card Number								
Cardholder's Signature	<u> -</u>	Expiry Date						
Please send your completed applic Mail: Admissions, The University of V Fax: (204) 779-3443 Email: admis			nipeg, MB R3 son: Student					
DECLARATION								
I declare that I have answered all of t that any misinformation will void this a	•		-	-	I understand			
Student's Signature		Date (YYYY/MM/DD)						
OFFICE USE ONLY								
□ PERC □ ADSU Last term	Admission Status_	Арр	roved by		Date			