



Request for Course Outline

STUDENT INFORMATION

_____	_____	_____	_____
Last Name	First Name	Middle Name	Student Number
_____			_____
Email Address			Telephone
_____	_____	_____	_____
Mailing Address	City	Province	Postal Code

PROGRAM INFORMATION

Diploma program _____	Year _____
Individual Course 1 _____	Year _____
Individual Course 2 _____	Year _____

*** Please note that The Professional Studies Program Area archives course outlines in PDF format only for a period of five years and may not have all the outlines available. ***

Course outlines for

- PICK UP** **MAIL to** student address (as listed above) **EMAIL**

Individual course outline _____ \$ 10.00 x _____
 Number of documents _____ Total Cost: \$ _____

OFFICE ONLY
Rct #: _____
Date: _____
Staff: _____

Cash Cheque Interac Credit Card Visa MasterCard
 16-Digit Card Number _____ Expiry Date _____

DOCUMENTS WILL BE PREPARED ONCE FEE IS PAID

Please note

1. Documents are normally completed within **completed within twenty-five working days.**
2. Documents will not be issued if student has an unpaid account with the University.
3. A separate form must be completed for each additional mailing address.
4. Photo I.D. must be presented when picking up documents.
5. Student must submit written consent if they want someone else to pick up their documents.

Signature _____ **Date** _____

This form must be submitted via email to paceregistration@uwinnipeg.ca