THE UNIVERSITY OF WINNIPEG
PROFESSIONAL, APPLIED AND CONTINUING EDUCATION

PROGRAM ADDITION OR TRANSFER FORM

My current program is:_____

I wish to add (check box below)

PLEASE INDICATE IF YOU ARE:

Adding a program
Completely transferring programs

List of Programs (choose appropriate one)

[ ] Advanced Diploma in Leadership in Early Childhood Care and Education
[ ] Applied Project Management Certificate
[ ] Business Systems Analysis Diploma
[ ] Career Development Practitioner Certificate
[ ] Educational Assistant Diploma
[ ] Human Resource Management Diploma
[ ] Information Assurance Certificate
[ ] Management Certificate
[ ] Marketing Management Diploma
[ ] Masters Certificate in Project Management
[ ] Network Security Certificate
[ ] Project Management Diploma
[ ] Public Relations Strategic Communications Diploma
[ ] Serious Games Certificate
[ ] Other_____

Student Contact Information (please print clearly)

Student ID #: _____

Last Name | First Name | Middle Name | Gender: ☐ Female ☐ Male

Home Address | Date of Birth (MM/DD/YYYY)

City/Town/Province | Postal Code | Email Address

Home Telephone | Cellular Telephone | Business Telephone

Employer | Job Title

I hereby authorize the release of my academic information to the following:

☐ My employer (as noted above)
☐ Educational Authority
☐ Manitoba Education and Training
☐ Other _____

Signature ***Date***

There is no additional application fee for adding to a program or transfers to a program

Last Revised: April 2017

515 PORTAGE AVENUE, WINNIPEG, MANITOBA, CANADA, R3C 2E9
TEL: (204) 982 – 6633 pace.UWinnipegCourses.ca FAX: (204) 944 - 0115