



THE UNIVERSITY OF WINNIPEG
Collegiate

1W02-515 Portage Avenue
Winnipeg, MB, R3B 2E9

collegiate.uwinnipeg.ca
E. collegiate@uwinnipeg.ca
T. 204.786.9221
F. 204.775.1942

Office Use Only

Date of Application _____

Student Number _____

2022-23 Academic Year

Application for Admission for: **CONDITIONAL Admission for Grade 9**

**Please complete all sections of the application form including the signatures of both parents (if applicable).
Submit completed application by email or in-person only.**

Note: Applicants for Concurrent Status should apply directly to The University of Winnipeg.

New Applicant Checklist:

- Official current report card
- \$150 non-refundable application fee
- Copy of birth certificate, passport, or permanent resident card

1.0 Student Information

Date of Birth _____ | _____ | _____ **Gender** _____
Month Day Year

Student's Full Legal Name _____
Last Name First Name Middle Name(s)

Permanent Home Address _____
Postal Code

Sessional Winnipeg Address (if different) _____
Postal Code

Home Phone _____ **Cell Phone** _____

Student's Personal Email* _____

Entering Grade (Circle One) 9 10 11 12

Citizenship and Immigration Status Canadian Citizen Permanent Resident

(Permanent residents must include a copy of permanent resident card/landed immigrant papers with application.)

Have you had or do you currently require extra supports or accommodations in a school setting? Yes No

If yes, please explain _____

Medical information is collected so that appropriate health care plans may be developed. This information will be shared only with the appropriate individuals. This information is protected by The Personal Health Information Act. Questions should be directed to the Collegiate Dean.

*Email addresses provided may be shared internally among Collegiate Faculty, student groups, and used for Collegiate communications

1.1 Academic Information

Current School/Last School Attended _____

School Division in which you reside _____

Have you been suspended or expelled from another school during the previous 24 months? Yes No

If yes, please explain _____

1.2 Family Information

Parent Guardian Relationship to Student _____

Name _____
Last Name First Name Middle Name(s)

Home Address _____
Postal Code

Home Phone _____ Cell Phone _____

Email* _____

Place of Employment _____ Work Phone _____

Parent Guardian Relationship to Student _____

Name _____
Last Name First Name Middle Name(s)

Home Address _____
Postal Code

Home Phone _____ Cell Phone _____

Email* _____

Place of Employment _____ Work Phone _____

Student Lives with Parent(s)/Guardian(s), Same Household Parents, Joint Custody One Parent/Guardian Only

(Please attach any legal orders or custodianship documents.)

Emergency Contacts (in addition to parents/guardians)

Full Name Phone Number Relationship to Student

Full Name Phone Number Relationship to Student

Personal information on this application is collected pursuant to 36(1) of The Freedom and Information and Protection of Privacy Act (FIPPA) and may be used and disclosed by The University of Winnipeg Collegiate for admission, registration, awards, student records, alumni services, housing, and other activities related to being a member of the Collegiate community. De-identified information may be used by the Collegiate for research/planning. Personal health information, if any, is collected pursuant to The Personal Health Information Act (PHIA) and will be used to develop appropriate student health-care plans. All personal and personal health information is protected under FIPPA and PHIA. If you have any questions about the collection and the use of this information, please contact: Dean of the Collegiate, The University of Winnipeg Collegiate, 515 Portage Avenue, Winnipeg, Manitoba, R3B 2E9, 204.786.9221, collegiate@uwinnipeg.ca.

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