



**Enrollment Office**

447 Webb Place • Winnipeg • Manitoba • R3B 2P2 • CANADA  
 1.877.94 BOOTH (877.942.6684) x865 toll-free phone  
 204.924.4865 (phone) • 204.942.3856 (facsimile)

**2018-2019 REGULAR SESSION COURSE REGISTRATION FORM**

*Courses may be cancelled due to low enrollment. The College assumes no responsibility for travel and related costs that students may incur as a result of a course cancellation.*  
**PLEASE FILL OUT THE FORM LEGIBLY TO ENSURE YOUR REQUESTS AND INFORMATION ARE PROCESSED CORRECTLY.**

<b>PROGRAM:</b> (please specify below: certificate, diploma, degree or Non-degree)		<b>STUDENT STATUS</b> (please check ✓ one of the boxes below)		
1		<input type="checkbox"/> Full-Time	<input type="checkbox"/> Part-Time	<input type="checkbox"/> Occasional
2				

**For Non-Degree Students: REASON YOU WISH TO TAKE THE COURSE(S):** (please check ✓ one)

Professional Development     Personal Interest     Pursuing a Degree

BOOTH STUDENT NUMBER		<b>MAILING ADDRESS</b> (DURING THE ACADEMIC YEAR):	
U OF M STUDENT NUMBER		NUMBER & STREET	
DATE OF BIRTH (MM/DD/YY)		CITY	
NAME (last, first, initial)		PROVINCE	
TITLE (rank, Mr, Ms)		POSTAL	
GENDER		HOME NUMBER	
CDN SOCIAL INSURANCE NUMBER		WORK NUMBER	
CHURCH AFFILIATION		FAX NUMBER	
CITIZENSHIP		EMAIL ADDRESS	

BOOTH COLLEGE COURSE NUMBER	BOOTH COLLEGE COURSE TITLE <small>If prerequisite is being waived, authorizing signature of instructor is required beside the course title.</small>	U OF M COURSE NUMBER	U OF M COURSE TITLE	TERM (Fall/Winter or Both/Spr)	CREDIT HOURS / SEMESTER (Fall/Winter/Spr)	COMMENTS

DE COURSE NUMBER	DISTANCE EDUCATION COURSE TITLE	TERM (Fall/Winter or Both)	CREDIT HOURS / SEMESTER (Fall/Winter)	REG REVISIONS (VW/W)

*In keeping with the Federal Privacy Laws, personal information collected will be used for the purposes of Enrollment: registering students, maintaining student records, processing student payment, program admission, gown orders, providing Moodle accounts (ExL), to inform of future courses available and of Student Development: making housing arrangements for Booth College students and non Booth College students, providing counseling services to students, coordinating Student Life, organizing chapel, and contacting students. The personal contact information will be used in case of emergency. If you have any concerns about this, wish to opt out, or for more information on our Privacy Policy, please contact our Privacy Officer at [privacy@boothcollege.ca](mailto:privacy@boothcollege.ca) or call (204) 947-6701 or check out our website at [www.boothcollege.ca](http://www.boothcollege.ca).*

**Declaration**

Booth University College is a Christian University College, owned and operated by The Salvation Army. As such, its ethos is shaped by its Christian heritage and identity. Students applying for admission to Booth University College should understand that as a Christian University College we expect our students to comply with the faith and lifestyle standards of the University College. These faith and lifestyle standards are enumerated in our Student Handbook (BoothUC.ca/campus-life/handbook). By signing this application you are confirming that you have read the Student Handbook and agree to abide by its policies and standards.

I hereby apply for admission to Booth University College and certify that the statements contained herein are true and complete. I understand that all parts of my Application for Admission become the property of the University College once submitted and will not be returned to me. I authorize Booth University College to verify all information submitted with my Application for Admission (including transcripts and information submitted by my designate).

I understand that misrepresentation, falsified documents, or the withholding of requested information with respect to this application may result in the cancellation of my acceptance and enrollment, or dismissal from the University College.

I accept that any information on falsified documents may be shared with the Association of Registrars of the Universities and Colleges of Canada. I give permission to Booth University College to use any photograph or video footage I am in for promotional purposes.

I authorize my high school/university to release my academic record(s) should the need arise to accelerate the processing of my application.

The personal information collected will be used for admission and enrollment purposes at Booth University College and Heartland International English School (if applicable) and may be used for determining eligibility for student awards. Information regarding graduation and awards may be made public.

By signing and submitting this application form I am agreeing to receive print and electronic communications from Booth University College.

We are committed to PIPEDA. See our website at [www.boothcollege.ca](http://www.boothcollege.ca) for Full Privacy Policy details.

	<b>SIGNATURES</b>	<b>DATE</b>
STUDENT <i>As a student of Booth College, I hereby agree to abide by the Student Life Handbook</i>		
PROGRAM COORDINATOR / ACADEMIC ADVISOR / DEPARTMENT CHAIR		
ACADEMIC DEAN: Dir. Study		
REGISTRAR OR ASSISTANT REGISTRAR	(Fall) (Winter Fees)	
REGISTRAR OR ASSISTANT REGISTRAR	(Winter Fees)	

Form last updated March 2015