William & Catherine
Booth College

Student Services – 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)
www.boothcollege.ca • enrollment@boothcollege.ca

2010-2011 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.

PROGRAM: (please specify below: certificate, diploma, degree or N/A)		**STUDENT STATUS** (please check ✓ one of the boxes below)							
1			**Full-Time**		**Part-Time**		**Occasional**		
2									
DEGREE PROGRAM ADMISSION DATE (for FT / PT students only)**:**		**LEVEL** (for FT / PT students only):		1	2	3	4		
Graduation anticipated April 2011 yes ___ no ___									

BOOTH STUDENT NUMBER		**MAILING ADDRESS** (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** If prerequisite is being waived, authorizing signature of instructor is required beside the course title.	**U OF M COURSE NUMBER**	**U OF M COURSE TITLE**	**TERM** (Fall/Winter or Both/Spr)	**CREDIT HOURS / SEMESTER** (Fall/Winter/Spr)			**REG REVISIONS** (VW/W)

DE OR LETTER OF PERMISSION COURSE NUMBER	**DISTANCE EDUCATION OR LETTER OF PERMISSION COURSE TITLE**	**EDUCATIONAL INSTITUTION**	**TERM** (Fall/Winter or Both)	**CREDIT HOURS / SEMESTER** (Fall/Winter)		**REG REVISIONS** (VW/W)

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

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 or call (204) 947-6701 or check out our website at www.boothcollege.ca.