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| FACULTY OF GRADUA<br>STUDIES & RESEARC  |                    |           | Shar<br>[   | ed C              | redentia              | Application  | n Forr         |
|---|--------------------|-----------|---|-------------------|-----------------------|--|----------------|
| ILLAM CENTRE FOR ADVANCED<br>29 TRIFFO HALL   | STUDIES            |           |   |                   | Phone                 | : 780.492.3499 Fax: 7<br>https://www.ualberta.ca/g |                |
| Last Name   |                    |           | First Name M  |                   |                       | ddle Name  |                |
|   |                    |           |   |                   |                       |  |                |
| Mailing Address   |                    |           |   | Date              | of Birth              | O Male   |                |
|   |                    |           |   | Duto              |                       | O Female   |                |
|   |                    |           |   |                   |                       | O Another/Prefer no                                | ot to disclose |
|   |                    |           |   | Count             | ry of Citizenship     | Citizenship Status ir                              | n Canada       |
| E-mail Address  |                    |           | Phone Number  | Length of stay at |                       | UofA   |                |
|   |                    |           |   |                   | 5 ,                   |  |                |
| Shared Credential Agreement   |                    |           | 1   |                   | <u> </u>              |  |                |
| Name of Home Institution  |                    |           |   | Home Institution  |                       | Degree Program                                     |                |
|   |                    |           |   |                   |                       | 0 0  |                |
| UofA Host department  |                    |           | Have you ever applied for admission or registered in courses at the University of |                   |                       |  |                |
|   |                    |           | Alberta? O Yes  | O N               | o If yes, enter U     | of A student ID                                    |                |
| Degree Program Specialization (if an  |                    |           | ny)   |                   |                       | Proposed start term Year                           |                |
|   |                    |           |   |                   |                       |  |                |
| Applicant's Signature (By signing this form, I agree that all information provided is true and complete.) |                    |           |   |                   | Date (MMM DD, YYYY)   |  |                |
|   |                    |           |   |                   |                       |  |                |
| Note to applicant: Ple  | ease save & send t | his appli | cation form by ema  | il to the         | U of A host depart    | ment when completed.                               |                |
| Home Institution use onl  |                    |           |   | ission of         | this application.)    | Date (MMM DD, YYYY)                                |                |
| Name of Department/Graduate Program approval  |                    | Signature |   |                   |                       |  |                |
| UofA host department us   | e only: (By sign   | ning this | form, I approve th  | e admis           | sion of this applicat | ion.)  |                |
| Department  |                    |           |   |                   |                       |  |                |
| Degree Program  | Specialization (if | any)      |   |                   |                       | Proposed start term                                | Year           |
| Name of Graduate Coordinator/ De  | pt Chair           | Signatu   | ıre   |                   |                       | Date (MMM DD, YYYY)                                |                |
|   |                    |           |   |                   |                       |  |                |
|   |                    |           |   |                   |                       | 1  |                |

Note to department: Forward signed application form to Faculty of Graduate Studies and Research.

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 Faculty of Graduate Studies and Research use only:

 Student ID
 App#
Date Coded Approval App#