

**GRADUATE STUDIES – OFFICE OF THE REGISTRAR  
UNIVERSITY OF WINNIPEG  
WITHDRAWAL / COURSE CHANGE FORM**

\_\_\_\_\_  
**Student Number**

\_\_\_\_\_  
**Program Advisor's Signature**

\_\_\_\_\_  
**Date**

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**WITHDRAWAL**

FULL NAME: \_\_\_\_\_

COMPLETE ADDRESS: \_\_\_\_\_

COURSE NUMBER: \_\_\_\_\_ COURSE TITLE: \_\_\_\_\_

TUITION PAID: \_\_\_\_\_ PROGRAM OF STUDY: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

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**COURSE CHANGE: (Theology/MFT students - the non-refundable deposit is non-transferable when either dropping a course OR when completing a course change when submitted after the add/drop period)**

FULL NAME: \_\_\_\_\_

COMPLETE ADDRESS: \_\_\_\_\_

COURSE NUMBER: \_\_\_\_\_ COURSE TITLE: \_\_\_\_\_

TUITION PAID: \_\_\_\_\_ PROGRAM OF STUDY: \_\_\_\_\_

**CHANGE TO:**

COURSE NUMBER: \_\_\_\_\_ COURSE TITLE: \_\_\_\_\_

TUITION PAID: \_\_\_\_\_ PROGRAM OF STUDY: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

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**For Office Use Only:**

Notes: \_\_\_\_\_  
\_\_\_\_\_

Date Entered: \_\_\_\_\_