Departments of Plant Science/Soil Science Graduate Student Registration / Registration Revision Approval Form Please refer to the online 2016-2017 University of Manitoba Graduate Calendar

NAME:			STUDENT #:						
SESSION:)	_(Year):	Winter: 20	(Y	ear)		(circle one)	
	Summe	er Session: 20		(Year)					
	om registratio							lent. If not, student will be ogress Report has not beer	
STUDENT	STATUS:	Full-Time	Par	t-Time	(If part-time, a	n additional	form n	nust be completed)	
Course Number	Lecture CRN (Course Registration Number – found in Aurora Student)	Lab CRN — if applicable (Course Registration Number — found in Aurora Student)		Course	Name	<u>Fa</u>	erm <u>ll</u> or inter	Course Classification if Auxiliary, Audit, or Occasional (See SECTION 1: Application, Admission, and Registration Policies of the online 2016- 2017 Graduate Calendar)	
*	*		and for Wind graduating in *Ph.D. stude 8000 for Fal	udents will regis: for Fall Term eter Term each ye rebruary). ents will register Term each year each year (CRN	ter for <i>Master's Thes</i> , ach year (CRN = $\frac{102}{50183}$) (ur for <i>Ph.D. Thesis</i> GR. (CRN = $\frac{10225}{50194}$) (unless	14) nless AD			
• Ph	_	Register for			tember (include ation GRAD 80		e term	you intend to complete it	
Do you exp	pect to gradua	ate in: Februa	ary 2017	May	2017 O	october 20	17		
get approval COURSE N	of the offerinum UMBER:	ng departmen	t. APPR0	OVAL OBT	AINED (Prof si	gnature):		major department, must	
	Student's S	ignature			Date				
PPROVED:	Advisor's S	Signature			Date	E BI OCK PE	EMOVE:		