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## Section 2. Graduate Program Approval

The above named student has permission of the \_\_\_\_\_  
program to take the Thesis/Practicum/Comprehensive Exam Writing Term required to  
complete their degree requirements.

GPC Chair (or designate): \_\_\_\_\_ Date: \_\_\_\_\_  
Signature MM/DD/YYYY

**Please return the completed and signed form to**  
**[graduateadmissions@uwinnipeg.ca](mailto:graduateadmissions@uwinnipeg.ca)**

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## Section 3. Graduate Studies Office Approval

Graduate Studies Approval Date: \_\_\_\_\_