

# 2017 Application & Registration Form



500 Shaftesbury Blvd. | Winnipeg, MB R3P 2N2 Canada  
Fax: 204.837.7415 Email: csop@cmu.ca **csop.cmu.ca**

## PERSONAL INFORMATION

Name (first/middle/surname) \_\_\_\_\_ Preferred name \_\_\_\_\_

Previous or other names (if applicable) \_\_\_\_\_

Current address \_\_\_\_\_

City/Town \_\_\_\_\_ Province/State \_\_\_\_\_ Postal/Zip Code \_\_\_\_\_ Country \_\_\_\_\_

Home phone \_\_\_\_\_ Business phone \_\_\_\_\_

Cell phone \_\_\_\_\_ Email \_\_\_\_\_

Permanent address (if different from above) \_\_\_\_\_

Name of emergency contact \_\_\_\_\_ Relationship \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

Your date of birth (month/day/year) \_\_\_\_\_ Place of birth \_\_\_\_\_

Gender \_\_\_\_\_ Citizenship \_\_\_\_\_ Marital Status \_\_\_\_\_

If not Canadian, your status in Canada:  Permanent resident  Study permit  Applying for visa  No visa required

Highest level attained in previous education \_\_\_\_\_

Please tell us of any disability pertinent to your learning or access \_\_\_\_\_

## OPTIONAL INFORMATION

Religious affiliation \_\_\_\_\_

**Organizational affiliation:** Name of organization \_\_\_\_\_

Mailing address \_\_\_\_\_ Email \_\_\_\_\_

How did you hear about the Canadian School of Peacebuilding? \_\_\_\_\_

**REGISTRATION MODE:** You may register either for training (lower tuition) or to earn university credit (regular tuition). If you are a graduate student, you may register at the graduate level for those courses marked on the reverse side of this form with an asterisk (\*).

- I wish to register for training
- I wish to earn university credit (three credit hours per course)
  - Undergraduate credit (see note # 1 below)
  - Undergraduate credit as a visiting undergraduate student from \_\_\_\_\_  
*Please arrange with your home institution to send a letter of permission.*
  - Graduate credit (see note # 2 below)
  - Graduate credit as a visiting graduate student from \_\_\_\_\_  
*Please arrange with your home institution to send a letter of permission. (see note # 3 below)*

1. If you have not been admitted to CMU previously as a regular undergraduate student, you may be admitted on the basis of this application as a Continuing Education student. To be eligible for admission with this status, you must have completed grade twelve and attained the age of twenty-one at the time of application. Students with Continuing Education status may sample up to twelve credit hours of courses, after which it will be necessary to apply to become a regular student.

2. If you have not been admitted to CMU as a regular graduate student, you must submit together with this form an official transcript showing that you have completed a baccalaureate degree with a grade point average of 3.0 or higher. You will then be eligible for admission as an Unclassified Graduate student. For admission into one of CMU's graduate programs, please go to [www.cmu.ca/gradstudies](http://www.cmu.ca/gradstudies) for details and requirements.

3. If you have already been attending CMU graduate courses as a visiting student from AMBS or FPBS, you do not need a letter of permission.

## FOR OFFICE USE ONLY

Registrar's Office \_\_\_\_\_ Payment \_\_\_\_\_

## Session I: June 12 - 16, 2017

	<b>Journalism and Peacebuilding</b>
	<b>Expressive Trauma Integration: Caregiving and Conflict Transformation*</b>
	<b>Exploring the Refugee Challenge*</b>

Please indicate the courses for which you are applying (maximum 1 course per session).

## Session II: June 19 - 23, 2017

	<b>Human Rights and Indigenous Legal Traditions*</b>
	<b>Gender and Violence: Theology and Peacebuilding*</b>
	<b>Practices for Transforming the Peacebuilder*</b>
	<b>Agroecological Peacebuilding: Becoming People of the Land</b>
	<b>Peace Resources in Islam and Christianity*</b>

Use a "T" if you plan to take a course for training, and a "C" if you plan to take a course for credit.

**If English is not your first language and your education was not primarily in English, please submit a writing sample (about 350 words) by answering the following questions:**

- ▷ What is your background and experience in preparing for courses like these?
- ▷ What do you hope to learn from the courses offered?
- ▷ What are your goals for when return to your home?
- ▷ How will you apply the skills you have learned and developed after the course?

I would like on-campus lodging and/or meals and have attached my completed "2017 Lodging and Meals Form."

I do not need on-campus lodging or meals.

To help us plan for the Thursday lunch banquet and for coffee breaks, if you prefer vegetarian meals, have food allergies or have other dietary concerns, please specify below:

Please use the following table to calculate your costs. Payment must accompany this form.

<b>Registration Fees</b> Session I: Training Fee \$560 or Academic Credit \$770 = _____ Session II: Training Fee \$560 or Academic Credit \$770 = _____	<b>REGISTRATION TOTAL</b>
<b>Lodging and Meals</b> Costs (See total at the bottom of the <b>Lodging and Meals Form</b> )	
<b>Late Fee \$50</b> (For registrations received after April 1, 2017)	
<b>TOTAL DUE</b>	

- The applicant grants permission for any photography, videos, or other pictures of the applicant to be used in CSOP promotional or educational material without any additional consent. **Note:** If you do not wish to grant permission, please contact csop@cmu.ca.

- Acceptance into the program will be confirmed by mail or email.

- I certify that the information provided on this application is accurate to the best of my knowledge.

Signature \_\_\_\_\_ Date \_\_\_\_\_

### PAYMENT

I would like to donate to the CSOP participant bursary fund. (donations over \$25 will receive a tax receipt) Amount: \_\_\_\_\_

I have enclosed a cheque or money order payable to Canadian Mennonite University  Please charge my credit card

MasterCard  Visa Name on Card: \_\_\_\_\_ Card Number: \_\_\_\_\_

Expiry Date: \_\_\_\_\_ Signature: \_\_\_\_\_ Authorization Number: \_\_\_\_\_