

PERSONAL INFORMATION

Name (first/middle/surname)	Preferred name	
Previous or other names (if applicable)		
Current address		
City/Town Province/State Postal/Zip	CodeCountry	
Home phone Busines	phone	
Cell phone Email		
Permanent address (if different from above)		
Name of emergency contact F	elationship	
Telephone Email		
Your date of birth (month/day/year) Place	of birth	
Gender: Male Female Citizenship N	Iarital Status	
If not Canadian, your status in Canada: Permanent resident	udy 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 tu If you are a graduate student, you may register for "Faith, Music and Ir		
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		
Graduate credit (see note # 2 below)		
Graduate credit as a visiting graduate student from <i>Please arrange with your home institution to send a letter of permissi</i>		
1. If you have not been admitted to CMU previously as a regular undergraduate student, you may be admitted on the status, you must have completed grade twelve and attained the age of twenty-one at the time of application. Studen 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 of of 3.0 or higher. You will then be eligible for admission as an Unclassified Graduate student.	icial transcript showing that you have completed a baccalaureate degree with a grade point average	
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 ____

Session I: June 18-22, 2012

Great Leaders of Peace: Stories of Aboriginal, Canadian and International Leaders

Peace Skills Practice

Speaking Out...and Being Heard—Citizen Advocacy

Session II: June 25-29, 2012

Participant Driven Processes: Cultivating Change, Respecting Difference Faith, Music and Inter-Ethnic Reconciliation

Women and Peacebuilding

Please indicate the courses for which you are applying (maximum 1 course per session). Use a "T" if you plan to take a course for training, and a "C" if you if you plan to take a course for credit.

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

Registration Fees	
Session I: Training Fee \$490 or Academic Credit \$690 =	
Session II: Training Fee \$490 or Academic Credit \$690 =	
REGISTRATION TOTAL	
Late Fee \$50	
(For registrations received after April 1, 2012)	
TOTAL DUE	

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

Meals and Lodging: On-campus meals and lodging can be arranged with CMU Hosting. Arrangements must be made ahead of time but payment for meals and lodging can be made upon arrival.

CMU Hosting Email: rental@cmu.ca **Phone**: 204.487.3300 **Toll Free**: 877.231.4570 **Fax:** 204.487.3858

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:

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 certify that the information provided on this application is accurate to the best of my knowledge.		
Signature	Date	
PAYMENT I have enclosed a cheque or money order payable to Canadian Mennonite University Please charge my credit card Master Card Visa Name on Card: Card Number:		
Expiry Date: Signature:	Authorization Number:	