

APPLICATION FOR

Minnesota-Manitoba Reciprocity

All information on this form is private. Except for social security number, which is voluntary, all information requested on this form is required for identification and will be used to determine whether your request for Minnesota-Manitoba reciprocity fee status will be granted. Failure to provide your social security number will have no effect on the decision about whether to grant your request for reciprocity. Information may be shared with offices within the University of Minnesota for the use described above.

Personal Information

Name:					U of M ID	numbori
last		first	middle		ט טו ואו וט	ilullibel.
Social Security number			Date of birth:			
				month	day	year
Phone (home):			Phone (other):			
Dames and adding						
Permanent address:	number and street					
	city, province, postal code					
Date your residency be						
	month yea	ar				
Current mailing address						
	number and street					
	province or state, pos	stal code or zip cod	de			

Parent or Guardian Information

Parent (or guardian) name:	last	first	middle
Phone (home):		Phone (other):	
Parent or guardian address:	number and street		
Date their residency began:	city, province, postal code month year		



Residency Information

Are you a Canadian citizen? Yes No (If no, give your immigration status in Canada)	
Enrollment term at the University of Minnesota you wish Manitoba reciprocity to begin:	
Spring year year	
Have you resided in Manitoba during the past 12 months? Yes No (If no, explain on a separate sheet any circumstances that may entitle you to reciprocity benefits. Attach the sheet to the form.)	
Were you claimed as a tax dependent on a parent or guardian's income tax form last year?	
(If yes, what province/state)	
Will you be claimed as a tax dependent on a parent or guardian's income tax form this year?	
(If yes, what province/state)	
Did you claim yourself as a tax dependent on your income tax form last year?	
(If yes, what province/state)	
Will you claim yourself as a tax dependent on your income tax form next year?	
(If yes, what province/state)	
This application must be completed in full and signed by the applicant. If the application is not complete it will be returned. The application must be submitted to the University of Minnesota-Twin Cities by the deadline noted below.)
Deadline: We encourage you to apply at least one month prior to the start of the term you are seeking Manitoba reciprocity tuit benefits. In the event that benefits are granted, it is your advantage to apply early so you won't be assessed tuition at the non-rate for that term.	
The final deadline is the last day of classes at the University of Minnesota-Twin Cities for the term benefits are needed. If you we participate in the program for the entire academic year, your application must be correctly completed and postmarked by the last of scheduled classes in the fall term. Applications will not be processed retroactively.	
Signature	
I certify that the information I have provided on this application form and on all other admission application materials is complete accurate, and true to the best of my knowledge. I understand that misrepresentation of application information is sufficient grouf for canceling admission or registration.	
Applicant's signature date	

Note: You must date and sign your application.

Submit your application to:

Office of Admissions
University of Minnesota-Twin cities
240 Williamson Hall
231 Pillsbury Drive S.E.
Minneapolis, MN 55455-0213
612-625-2008
1-800-752-1000