

# Application to Graduate for Part-Time Students



**FANSHAWE**  
Office of the Registrar  
Rm # E1012

General Instructions –

## Part-time Students

Students who have successfully completed all the requirements of a program, (or are registered in their last course) must complete this application in order to be assessed, and if eligible recommended for graduation. If recommended for graduation, you will be invited to the next graduation ceremony. To find out the deadlines to apply please visit [www.fanshawec.ca/graduation](http://www.fanshawec.ca/graduation)

**Don't wait to apply until final grades are available. Submit the completed application to your respective divisional office.**

**For Clinton, Goderich & Kincardine students please submit your applications to Clinton Centre directly:**

Mail: 169 Beech Street Clinton, ON N0M 1L0

Fax: (519) 482-3088

Email: [Clinton@fanshawec.ca](mailto:Clinton@fanshawec.ca)

Phone: (519) 606-1484

**If you are unsure of the contact information for your division, please inquire at 519-452-4430 or email [graduation@fanshawec.ca](mailto:graduation@fanshawec.ca)**

**Anyone applying after the deadline will be invited to the next graduation ceremony. Please note:** graduation information will be sent to you by email to your FanshaweOnline and any other email addresses on file. Please ensure that your email addresses are up to date on WebAdvisor (visit [www.fanshawec.ca/web-advisor](http://www.fanshawec.ca/web-advisor)).

<b>STUDENT INFORMATION</b>		Student ID #: _____
Student's Name: _____		Alt./Prior Name: _____
Date of Birth [YY/MM/DD]: ____ / ____ / ____	Email : _____	Phone#: ( ____ ) ____ - ____
<b>Mailing Information:</b>		
Street Address: _____		
City: _____	Province: _____	Postal Code: _____
Program Name: _____		
Year of most recent course taken: _____	Term of most recent course taken (check one):	
	<input type="checkbox"/> Winter Term January-April	<input type="checkbox"/> Summer Term May-August
		<input type="checkbox"/> Fall Term September – December
<b>Reason for completing this program:</b>		
<input type="checkbox"/> Personal growth	<input type="checkbox"/> Professional growth (e.g. career advancement)	<input type="checkbox"/> Required for employment
<input type="checkbox"/> Other (please specify): _____		

**Signature of Student:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT

Fanshawe College adheres to the Freedom of Information and Projection of Privacy Act. The information collected on this form is collected under the legal authority of the Ontario Colleges of Applied Arts and Technology Act, 2002, Ontario Regulation 34/03. The information is used for administrative, statistical and safety and security purposes of the college and/or the ministries and agencies of the Government of Ontario and the Government of Canada.

Fanshawe College is required to disclose personal information such as Ontario Education Numbers, student characteristics and educational outcomes to the Minister of Training, Colleges and Universities under s. 15 of the Ministry of Training, Colleges and Universities Act, R.S.O. 1990, Chapter M. 19 as amended. The ministry collects this data for purposes such as planning, allocating and administering public funding to colleges, universities and other post-secondary educational and training institutions and to conduct research and analysis, including longitudinal studies, and statistical activities conducted by or on behalf of the ministry for purposes that relate to post-secondary education and training. Further information on how the Minister of Training, Colleges and Universities uses this personal information is available on the ministry's website.

For further information, contact the Registrar, Fanshawe College, 1001 Fanshawe College Boulevard, P.O. Box 7005, London, Ontario N5R 5R6 **N:\Admin Support\Admin Support\FORMS\UCS - Updated: 2/26/2016**