			Name	Student ID #		For Office Use Only
in	6730	University Drive	Phone #			Transcript Record
		be AB T4L 2E5				Unsatisfactory
	Phone: 403/782-3381 ext. 4026 MAN Email: Registrar@Burmanu.ca			BBA BEd Bed-AD BSc3 Cert. Open	LI BANUS LI BSC4	
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	tisfa gistr	Letter grade <u>.</u>	and percentage	% earned	d by student.	
∩ B	Sat Reç	Date Entered			Initials	
	•,					Updated 12-Mar-18
			Name	Student ID	#	For Office Use Only
			Phone #			Transcript Record
_	l (===					Satisfactory
	6730 University Drive Lacombe AB T4L 2E5		Email			Unsatisfactory
lā	Phone	ext. 403/782-3381	Program of Study 🗆 BA4 🗖	BBA 🗆 BEd 🖵 Bed-AD BSc3 🗖 Cert. 🗖 Open	UBMUS UBSc4	
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UNIVER	SITY Web	site: www.Burmanu.ca	Major/Concentration			
		Breadth or Elec its for 3 year d	ive a Satisfactory grade, a student tive courses. Only 3rd or 4th year s egrees. See the Academic Calendar e schools have been known to reject	tudents may apply up to maximu for additional details.	m of 12 credits for 4	year degrees and 9 cred
	Satisfactory/Unsatisfactory Registration	Course Prefix/N	umber Course Title			Credits
IRMAN UNIVERSITY		Meets Requirer	nent: 🛛 🖵 Breadth		9	
		Summer Ter	m () 20 20 🖬 Fa	ll Term 20 20 🛛	Winter Term 20	20
		Student Signatur	e		Date	DD/MMM/YYYY
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