

## Request for Continuing Education Alternate Examination

Please see the Continuing Education website for alternate examination dates: [umanitoba.ca/extended/coned/](http://umanitoba.ca/extended/coned/)

### THIS SECTION TO BE COMPLETED BY THE STUDENT

Student Last Name: \_\_\_\_\_ First (Given) Name: \_\_\_\_\_

Student Number: \_\_\_\_\_ Date of Birth (yy/mm/dd): \_\_\_\_\_

Course Name: \_\_\_\_\_

Subject Code: \_\_\_\_\_ Course Number: \_\_\_\_\_

Section Number: \_\_\_\_\_ CRN: \_\_\_\_\_

Course taken in:  Fall 20\_\_\_\_  Winter 20\_\_\_\_  Summer 20\_\_\_\_

Aboriginal Focus Program  Continuing Education  English Language Studies and International Programs  Summer Session (Non-Degree)

Instructor Name: \_\_\_\_\_

Reason for Request: \_\_\_\_\_

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

Your request to write the alternate examination must be sent to our office at least five (5) working days prior to the regularly scheduled examination, and accompanies by payment in the amount of \$50.00 (cheques payable to The University of Manitoba). Supporting documentation may be required. The request should be sent to the attention of Student and Information Services, Room 185, Extended Education Complex, The University of Manitoba, Winnipeg, MB R3T 2N2. Fax to: 204-272-1626.

Your personal information is being collected under the authority of *The University of Manitoba Act*. The information you provide will be used by the University for the purpose of processing your request for an alternate examination. Your personal information will not be used or disclosed for other purposes, unless permitted by *The Freedom of Information and Protection of Privacy Act* (FIPPA). If you have any questions about the collection of your personal information, contact the Access & Privacy Office (tel. 204-474-9462), 233 Elizabeth Dafoe Library, University of Manitoba, Winnipeg, MB, R3T 2N2.

### THIS SECTION TO BE COMPLETED BY THE PROGRAM ADMINISTRATOR / STUDENT ADVISOR

Alternate Examination has been:  Approved  Denied

Type of Examination:  Open Book  Closed Book  Online Exceptions: \_\_\_\_\_

Length of Examination: \_\_\_\_\_ Date Scheduled: \_\_\_\_\_

Time: \_\_\_\_\_

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

### THIS SECTION TO BE COMPLETED AND THE STUDENT'S RECORD UPDATED BY STUDENT AND INSTRUCTOR SERVICES

Comments: \_\_\_\_\_

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

### METHOD OF PAYMENT:

All applicable fees must accompany alternate examination form. If you are scheduled to write two exams on the same day at the same time, the alternate fee will be waived.

Cash or Debit – In-person only.  Cheque/Money Order – Payable to the University of Manitoba (post-dated cheques can not be accepted).  Fee waived.

Invoice Employer – A request to invoice must be on letterhead and authorized by an official of the employer or sponsoring agency. Without prior credit history, amounts over \$1,000 require credit approval. Contact Student and Instructor Services at 204-474-9921 or Toll-free 1-888-216-7011 ext. 9921 for a copy of the required form.

Payment by credit card – Complete the following section.  Visa  MasterCard

Card holder's name (as it appears on the card): \_\_\_\_\_ Amount \$ \_\_\_\_\_

Credit card number: \_\_\_\_\_ Expiry date: \_\_\_\_\_

Authorizing signature: \_\_\_\_\_