

Request for Exemption from Writing a Diploma Examination

ALBERTA STUDENT NUMBER

SURNAME

LEGAL FIRST AND MIDDLE NAMES

BIRTH DATE

Year	Month	Day
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SEX

M-Male
F-Female

TELEPHONE

(e.g., 92 Jul 20)

PERMANENT ADDRESS

Apt/Street/Ave/P.O. Box/Route

Village/Town/City

Province

Postal Code

To be completed by the student:

1. Reason for the request for exemption:

- Inclement Weather Administrative Error Other (specify) _____

Describe the specific event or issue and why it prevented or will prevent you writing the diploma examination(s) for which you have requested an exemption (attach relevant supporting documentation).

Bereavement

(Attach death certificate/obituary)

_____ Name of the deceased

_____ Relationship to the deceased

If the death is not recent or the deceased is not an immediate family member, describe the reason for the request for exemption.

Acute* Medical (specify) _____

(Attach *Physician Confirmation of Acute Medical Condition or Illness Affecting the Writing of a Diploma Examination* form)

*Exemptions are **not** granted for chronic medical conditions (see Chronic Medical Conditions, *Special Cases & Accommodations* section of the General Information Bulletin).

Court (attach subpoena and/or other official document outlining the obligation to attend)

If court date is not specific to the officially scheduled date and time of the examination(s) describe the reason for the request for exemption (additional supporting documentation may be requested)

2. Examination administration session for which this request applies:

November 2011

January 2012

April 2012

June 2012

August 2012

3. Specific diploma examination(s) for which this request applies: _____

4. Rationale for requesting an exemption(s) rather than deferral to a future examination administration session:
