

Notification of Separate Writing For Part A/B of the Humanities Diploma Exams



ALBERTA STUDENT
NUMBER

SURNAME

LEGAL FIRST AND
MIDDLE NAMES

BIRTH DATE

Year	Month	Day
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TELEPHONE

(e.g., 95 Jul 20)

PERMANENT
ADDRESS

Indicate the administration in which the completed component was written.

Course Name	Completed Diploma Exam Component	Administration (✓ check)					Year
		<input type="checkbox"/> November	<input type="checkbox"/> January	<input type="checkbox"/> April	<input type="checkbox"/> June	<input type="checkbox"/> August	

Indicate the administration in which the missed component will be written

Course Name	Missed Diploma Exam Component	Administration (✓ check)					Year
		<input type="checkbox"/> November	<input type="checkbox"/> January	<input type="checkbox"/> April	<input type="checkbox"/> June	<input type="checkbox"/> August	

Reason for separate writing (Please be specific): _____

I understand that the personal information on this form is being collected under the authority of section 33(c) of the *Freedom of Information and Protection of Privacy Act*, and will be used to administer and process the writing and/or rewriting of diploma exam(s). It will be treated in accordance with the privacy protection provision of **Part 2** of the *Freedom of Information and Protection of Privacy Act*. If you have any questions about the collection of this information, contact the Director, Exam Administration, at (780) 492-1462.

I have accurately provided information on this request form.

Signature of Student

Date

Email address

This is not a registration form. The student must register for the diploma exam using *myPass* or by submitting a *Diploma Exam Registration Form* prior to writing the missed component.

This form must be submitted to:

Alberta Education, Exam Administration
44 Capital Blvd.
10044 – 108 Street
Edmonton AB T5J 5E6

E-mail: exam.admin@gov.ab.ca
Phone: (780) 492-1400 Fax: (780) 492-1451