Undergraduate Challenge for Credit Registration Form

Not all courses are available for challenge. Before you complete this form, please consult the course syllabus and undergraduate Calendar to review the Challenge for Credit process and specific course requirements. Prior to submitting this form, permission to challenge a course for credit must be obtained from the faculty member, or designate, who is responsible for the specific AU course. Faculty contact information may be found online (www2.athabascau.ca/contact/list/coordinators.php) Visit the AU Undergraduate Calendar for more information: calendar.athabascau.ca/undergrad/current/adm-reg-eval/reg-challenge-for-credit.php

General Information (please print)

Name:

Former Name:

Mailing Address

City/Town                                     Province/State

Country                                     Postal/Zip Code

Primary Phone                                     Secondary Phone

Email

Course Fee Information

<table>
<thead>
<tr>
<th>Course name and number (e.g., ORGB 364)</th>
<th>Number of credits</th>
<th>Preferred start date Month Year</th>
<th>Course fees</th>
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Comments:

Total fees

The following rules apply to the challenge for credit process. Indicate your understanding and agreement of the process by checking off the following boxes:

☐ I have consulted and received approval to challenge a course from the appropriate faculty member (required).

☐ I understand that the three-month contract cannot be extended.

☐ I understand that there is no provision for withdrawal from a course taken via the challenge for credit process once the registration is processed.

☐ I understand that there is no tutor or faculty member support.

☐ Students registering for challenge for credit will have access to AU print learning resource materials, limited to bound textbooks and print readings at full cost (defined as AU's full purchase cost, plus shipping, plus a 20 percent handling fee). Any fees assessed for learning resource materials are **non-refundable**. If I would like to order the learning resources available to me, I must contact Materials Management (cmat@athabascau.ca).

☐ It is recommended students ensure the availability (and purchase) of learning resource materials after approval is obtained to challenge a course and prior to submitting this Challenge for Credit Course Registration.

☐ If there is a challenge exam, I must follow the rules set out by the Undergraduate Exam Request and Completion Policy and its procedures.

☐ I understand that supplemental exams are not allowed in the Challenge for Credit process.

Signature: ___________________________ Date: _______________
Payment

You may use your credit card or e-transfer to pay Athabasca University fees. You can also pay by money order or cheque, but there is currently a time delay with these options. Please do not send cash in the mail. Post-dated cheques are not accepted. Do not send confidential information via email. Email messages are not secure. Refer to a current Calendar for fee information, calendar.athabascau.ca/undergrad/current/fees-refunds/fees.php.

The personal information collected on this form will be used for the purpose of processing payments. This personal information is being collected under the authority of Section 33(c) of Alberta’s Freedom of Information and Protection of Privacy Act. If you have any questions about the collection and use of this information, contact the Senior Accountant, Athabasca University, 1 University Drive, Athabasca, Alberta, T9S 3A3, Phone: 800.788.9041.

Name: ________________________________
Address: __________________________________________
________________________________________
__________________________________________________________________
POSTAL/ZIP CODE
__________________________________________________________________
NAME ON E-TRANSFER ACCOUNT
DATE OF TRANSFER
* E-TRANSFER: If paying by e-transfer, please include the following in the message box of your bank transfer (if applicable): student ID number, your full name, the type of fee paying, course name/number, your email address and phone number.

☐ VISA® ☐ MasterCard® ☐ AMERICAN EXPRESS®

________________________________________
EXPIRY DATE

DESCRIPTION (e.g., application fee, evaluation fee) AMOUNT CHARGED

Where incorrect fees are listed, Athabasca University will automatically charge your account with the correct amount.

TOTAL

Signature: ____________________________ Date: ______________

TOTAL