



**Athabasca University**

# Undergraduate Course Registration Form

STUDENT ID NUMBER (if applicable)

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Office of the Registrar, Athabasca University  
 1 University Drive, Athabasca, AB T9S 3A3  
 Toll Free in Canada/US: 1.800.788.9041  
 Other: 780.675.6111, Fax: 780.675.6174

This form is to be completed by individualized study students only. Grouped study students register at the institution that offers the course. New and inactive students must also complete the Undergraduate General Application Form, or login to myAU at [my.athabascau.ca](http://my.athabascau.ca) to access forms.

FOR OFFICE USE ONLY

SPONSORING CLIENT ID NUMBER
REFERENCE NUMBER

## General Information (please print)

Name: \_\_\_\_\_  
 LAST FIRST MIDDLE

Former Name: \_\_\_\_\_  
 LAST FIRST MIDDLE

Mailing Address: \_\_\_\_\_  
 \_\_\_\_\_  
 CITY/TOWN PROVINCE/STATE

COUNTRY POSTAL/ZIP CODE  
 \_\_\_\_\_

Telephone: ( ) \_\_\_\_\_  
 RESIDENCE BUSINESS

Fax/E-mail: ( ) \_\_\_\_\_  
 FAX E-MAIL

## Course Registration and Fees

Course name and number (e.g., ORGB 364)	Number of credits	Credit or audit *	Preferred start date Month Year	Course fees ‡
_____	_____	<input type="checkbox"/> Credit <input type="checkbox"/> Audit	_____	_____
_____	_____	<input type="checkbox"/> Credit <input type="checkbox"/> Audit	_____	_____
_____	_____	<input type="checkbox"/> Credit <input type="checkbox"/> Audit	_____	_____
_____	_____	<input type="checkbox"/> Credit <input type="checkbox"/> Audit	_____	_____

Comments: \_\_\_\_\_ **Total fees** \_\_\_\_\_

## Alternative Course Choices

Course name and number (e.g., ORGB 364)	Number of credits	Credit or audit *	Preferred start date Month Year	Course fees ‡
_____	_____	<input type="checkbox"/> Credit <input type="checkbox"/> Audit	_____	_____
_____	_____	<input type="checkbox"/> Credit <input type="checkbox"/> Audit	_____	_____

Comments: \_\_\_\_\_ **Total fees** \_\_\_\_\_

\* Audit refers to registration in a course where credit is not received. Audit students receive the same tutorial support as credit students and pay the same fees. However, they are excluded from writing exams and do not receive a final grade.

‡ For current fee information, refer to an *Athabasca University Calendar* or online at [calendar.athabascau.ca/undergrad/current/fees-refunds/fees.php](http://calendar.athabascau.ca/undergrad/current/fees-refunds/fees.php)

The personal information collected on this form, and any other personal information collected and maintained as part of a student's record, will be used for the purposes of admission, registration, issuing income tax receipts, scholarships and awards, convocating, sending educational information, and for university research and planning. Certain personal information will also be disclosed to Statistics Canada (as required by the Statistics Act [Canada]), Advanced Education to meet reporting requirements, and by agreement, to the Students' Union and Alumni Relations for the purposes of membership, fee collection, and contacting students. This information is collected under the authority of the Post-secondary Learning Act, 2003, which mandates the programs and services offered by Athabasca University, and Section 33(c) of the Alberta Freedom of Information and Protection of Privacy Act. The information will be protected by the provision of the Alberta Freedom of Information and Protection of Privacy Act. If you have any questions about the collection and use of this information, contact the Coordinator, Enrolment Services, Athabasca University, 1 University Drive, Athabasca, Alberta T9S 3A3. Phone: 800.788.9041.

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

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## Prerequisite Declaration

(please print)

I, \_\_\_\_\_, declare that I have passed  
NAME  
 \_\_\_\_\_ at \_\_\_\_\_  
COURSE INSTITUTION  
 on \_\_\_\_\_ and want this course to be accepted as  
DATE  
 fulfilling the prerequisite requirements for \_\_\_\_\_.  
COURSE

I recognize that:

- 1) I may be requested to submit an official transcript and/or detailed course description to verify this statement.
- 2) If it is determined that I have made a false declaration, I will be withdrawn from the course and no fees will be refunded.
- 3) Completion of a false declaration may also constitute an act of academic misconduct, which could result in disciplinary action under the Athabasca University Student Code of Conduct and Right to Appeal Regulations.
- 4) I am **solely** responsible for determining that the material presented in the Athabasca University prerequisite course has been adequately covered within the course I have identified above.

I certify that in determining I have met the prerequisite, I have consulted the *Alberta Transfer Guide* for course work completed through an Alberta college or technical institution.

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

## Payment

You may use your credit card, money order, or cheque to pay Athabasca University fees. 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.athabasca.ca/undergrad/current/fees-refunds/fees.php](http://calendar.athabasca.ca/undergrad/current/fees-refunds/fees.php)

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 AMERICAN EXPRESS®


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STUDENT ID NUMBER (if applicable)

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

Address: \_\_\_\_\_

\_\_\_\_\_

POSTAL/ZIP CODE

\_\_\_\_\_/\_\_\_\_\_  
EXPIRY DATE

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

DESCRIPTION  
(e.g., ORGB 364)

AMOUNT CHARGED

TOTAL	

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.

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