Examinee Appeal Form

Eviction from a Diploma Exam

Alberta Education

Student's Name: _____ Alberta Student Number: _____

Appellant's Name: _____ Tel. No.: _____

Mailing Address: _____

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Appeal:

Diploma Exam and Date Written: _____

What events led to the eviction from the diploma exam and on what basis are you appealing that eviction? (Attach addition sheets if more space required)

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Signature of Student	Date	Email Address
Signature of Parent or Guardian (if student is under 18 years of age)	Date	Email Address

The personal information collected 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 review and process the appeal related to 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) 643-9157.

Mail, email, deliver, or fax **within 7 days** of written notice of the eviction to:

Pascal Couture, Director
Exam Administration, Alberta Education,
Mailing Address: 6th Floor, 44 Capital Boulevard
10044 – 108 Street, Edmonton AB T5J 5E6

Fax: (780) 643-7051
Email: Pascal.Couture@gov.ab.ca