Athabasca University (CANADA'S OPEN UNIVERSITY)

Undergraduate Course Registration Form

STUDENT ID NUMBER (if applicable)							

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 http://my.athabascau.ca to access forms.

F	FOR OFFICE USE ONLY
	SPONSORING CLIENT ID NUMBER
	REFERENCE NUMBER

Other: 780.675.6111, Fax: 780.675.6174		tive students must also complete the Undergraduate General Application Form, or login to myAU at http://my.athabascau.ca to access forms.				NUMBER	
General	Name:	LAST		FIRST		MIDDLE	
Information (please print)	Former Name: Mailing Address:	LAST		FIRST		MIDDLE	
		CITY/TOWN COUNTRY			PROVINCE/STATE		
	Telephone: Fax/E-mail:	() RESIDENCE () FAX			BUSINESS E-MAIL		
Course	Course name and number (e.g., ORGB 364)		Number of credits	Credit or audit *	Preferred sta Month	r t date Year	Course fees ‡
				☐ Credit			
Registration				☐ Audit			
and Fees				☐ Credit			
				☐ Audit			
				☐ Credit			
				☐ Audit			
				☐ Credit			
				☐ Audit			
	Comments:				т	otal fees	
Alternative	Course name and number (e.g., ORGB 364)		Number of credits	Credit or audit *	Preferred sta Month	rt date Year	Course fees ‡
Course				☐ Credit			
Choices				☐ Audit			
				☐ Credit			
				☐ Audit			
	Comments:				T	otal 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
 http://calendar.athabascau.ca/undergrad.

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 T95 3A3. Phone: 800.788.9041.

STUE	DENT	ID N	UMB	ER (if	appli	cable)

Prerequisite
Declaration
(please print)

l,	, declare that I have passed
NAME	
	at
COURSE	INSTITUTION
on	and want this course to be accepted as
DATE	
fulfilling the prerequisite requirer	ments 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.
- 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				STUDENT ID NUMBER (if applicable
You may use your credit card, money order, or cheque to pay Athabasca University fees.	Name: Address:			_
Please do not send cash in the mail. Post-dated cheques are not accepted. Refer to a current	□ VISA® □ MasterCard®			POSTAL/ZIP CODE
Calendar for fee information, http://calendar.athabascau.ca/	☐ AMERICAN EXPRESS®			EXPIRY DATE
undergrad. The personal information collected on this formation collected on the collected on th		Where incorrect fees are	DESCRIPTION (e.g., ORGB 364)	AMOUNT CHARGED
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.		listed, Athabasca University will automatically		
		charge your account with the correct amount.		
	Signature:			Date: