

Student who have not previously attended the University of Regina must apply for admission, enrol in a program of study, and register in classes. Challenge examinations allow a student to obtain credit by demonstrating mastery of the course material in a comprehensive examination. Refer to the *Credit by Challenge* section in the Undergraduate Calendar for more information.

Student Information (Please Print)

Surname	First Name	Middle Name(s)	U of R Student ID (9 digits)
Email (The University of Regina's official means of communication is through your @uregina.ca email)			Daytime Phone Number
Primary Faculty or Academic Unit <input type="checkbox"/> AR <input type="checkbox"/> BU <input type="checkbox"/> CE <input type="checkbox"/> CT <input type="checkbox"/> ED <input type="checkbox"/> ES <input type="checkbox"/> GS <input type="checkbox"/> KI <input type="checkbox"/> MP <input type="checkbox"/> NU <input type="checkbox"/> SC <input type="checkbox"/> SP <input type="checkbox"/> SW		Campus or Federated College <input type="checkbox"/> U of R <input type="checkbox"/> Campion <input type="checkbox"/> Luther <input type="checkbox"/> FN Univ	Term <input type="checkbox"/> Winter (Jan-Apr) Year <input type="text"/> <input type="checkbox"/> Spring/Summer (May-Aug) <input type="checkbox"/> Fall (Sept-Dec)

Course(s) for which a Challenge Examination is requested (Please Print)

CRN	Subject	Course Number	Section	Credit Hours	Approval of Dean or designate offering the class	Date Approved
						DD-MMM-YYYY
						DD-MMM-YYYY
						DD-MMM-YYYY
						DD-MMM-YYYY

Your personal information is collected under the authority of the University of Regina Act, and in accordance with *the Local Authority Freedom of Information and Protection of Privacy Act* (Saskatchewan) and the *Personal Information Protection and Electronic Documents Act* (Canada), for the purpose of a request(s) for a credit by challenge examination. If you have any questions about the collection, use, or disclosure of this information by the University, please contact the Head, Access to Information and Protection of Privacy, 306-585-5163.

Signature of student	Date DD-MMM-YYYY
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OFFICE USE ONLY

Decision of the dean or designate:

Signature of dean or designate	Date DD-MMM-YYYY
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