

APPLICATION TO WRITE TECHNICAL EXAMINATIONS

1500 Scotia One, 10060 Jasper Avenue Edmonton, Alberta T5J 4A2 Tel: (780) 426-3990 Fax: (780) 426-1877 1-800-661-7020

Name in Full	APEGGA Office Use Only
Mailing Address	Pseudonym Number
	Member Number
Business Telephone Home Telephone	Receipt Number
I hereby make application to write examinations in:	Amount
☐ October 2003 (Deadline date August 29/03) ☐ May 2004 (Deadline date February 27/04) ☐ October 2004 (Deadline date August 27/04)	Type of Assessment
I wish to write in:	
☐ Calgary ☐ Edmonton ☐ Medicine Hat ☐ Lethbridge ☐ Fort McMurray ☐ Red Deer ☐ Whitehorse or Yellowknife	
other, subject to approval	
I wish to write the following examination(s):	Mark
EXAM NUMBER EXAM NAME	
eg. 98-Prelim-1 Calculus	
Enclosed is my cheque for \$ (\$150.00 each) made payable to APEGGA <i>or</i>	
□Visa □Master Card □AMEX #	
Expiry Date:	
Date:Signature:	
Note: Applications will not be accepted after the Deadline Date. Candidates who request a deferral to the next exam session after the Deadline Date, cancel after the Deadline Date, fail to write the exam, or do not pass the exam will not have their fees refunded, nor will a credit be carried to the next exam session.	