

## AP 209-1 Course Challenge Application Form

### Student Information:

Student Name: \_\_\_\_\_ Date of application: \_\_\_\_\_

Name of school registered at: \_\_\_\_\_

School Student #: \_\_\_\_\_ Personal Id. # (PEN): \_\_\_\_\_

Date of birth \_\_\_\_\_  
(dd/mm/yy)

Parent/Legal Guardian Name: \_\_\_\_\_

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

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone number: \_\_\_\_\_

I am applying to challenge: (*course name*) \_\_\_\_\_

I wish to challenge this course and will have submitted this application by either:

- October 15 (with any provincial exam component to be written in \_\_\_\_\_)
- March 15 (with any provincial exam component to be written in \_\_\_\_\_)

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
School Official Signature

Approval Signature: \_\_\_\_\_

This application submitted by \_\_\_\_\_ to challenge

\_\_\_\_\_ Course is approved.