



ONLINE POWER ENGINEERING MOODLE EXTENSION REQUEST

Email completed form to: Registrar@keyano.ca

COVID-19 Update: Government order (CMOH Order 042-2021) gives Post-secondary institutions the authority to implement a student proof of vaccination program. College leadership has reviewed this order and has implemented a student proof of vaccination program. Please see [FAQs on the College website](#) for more information.

Personal Data

			STUDENT ID	
LAST NAME	FIRST NAME (LEGAL)	MIDDLE NAME (LEGAL)		
FORMER/MAIDEN NAME (IF ANY)	GENDER IDENTITY Male <input type="checkbox"/> Female <input type="checkbox"/> Undefined <input type="checkbox"/> Unspecified <input type="checkbox"/>	ALBERTA STUDENT NUMBER		
DAYTIME PHONE (+ AREA CODE)	E-MAIL ADDRESS	BIRTHDATE (YYYY/MM/DD)		
STREET OR PO BOX ADDRESS	CITY	PROVINCE	POSTAL CODE	

Please Note

All Online Power Engineering Moodle Extension Requests must be submitted prior to the original course end date.

Select one of the following:

	Extension	Section	Duration	Extension Fee	Date Requested	New Expiry Date
<input type="checkbox"/>	PE 4 th Class Part 'A' PELM 4010 (NEW)		3 months	\$150.00		
<input type="checkbox"/>	PE 4 th Class Part 'B' PELM 4020 (NEW)		3 months	\$150.00		
<input type="checkbox"/>	PE 3 rd Class Part 'A' PELM 3010		3 months	\$150.00		
<input type="checkbox"/>	PE 3 rd Class Part 'B' PELM 3020		3 months	\$150.00		

Waiver

I understand that I qualify for the extension indicated above, determined by then courses I am registered in. If I have not completed the courses by the new expiry date, my access to Moodle will be terminated and I will be required to re-register and pay the full tuition and associated fees.

I understand that on the date(s) of the course I will have to provide proof of vaccination or submit a Keyano College Medical Exception Form or Religious Exemption Form.

STUDENT SIGNATURE *	DATE
OFFICE OF THE REGISTRAR SIGNATURE	DATE

*Signature is not required if submitting this form and supporting documentation via your Keyano student email account to registrar@keyano.ca

Method of Payment

CREDIT CARD NUMBER	EXPIRATION DATE
CARD ISSUED TO	SIGNATURE

4120000 - 41210

GST #R107566218

OFFICE OF THE REGISTRAR				
CONTRACT #	CWA #	COST CENTRE	PO # / INVOICE	COMPANY
PROCESSED BY			AUTHORIZATION #	COMPANY CONTACT

The personal information requested on this form is collected under the authority of section 65 of the Post-Secondary Learning Act and section 33© of Alberta's Freedom of Information and Protection of Privacy Act and will be used for the purpose of admission, registration, issuing income tax receipts, scholarships and award, convocation, sending education information, library services, emergency notification, and for college research and planning. Certain personal information will also be disclosed to Statistics Canada to comply with the Statistics Act; Alberta Advanced Education to meet reporting requirements; Alberta Human Services for determining and monitoring student eligibility for their services; work experience and practicum sites to set up appropriate placements; Students' Association for the purposes of membership and information sharing; Syncrude Sport & Wellness Centre for the purposes of membership, Student Academic Support Services for the purposes continuous improvement of student academic success. For information about the collection and use of this information, contact the Registrar.