



Proctor Application Form

Columbia College, Registrar's Office
802 Manning Road N.E., Calgary, AB, T2E 7N8
Toll Free in Canada / US: 1-888-235-9370
Other: 403-235-9300, Fax: 403-272-3805
www.columbia.ab.ca

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Student ID Number

Student: Please take this to your proctor and have that person return it by email or fax to: assessment@columbia.ab.ca

About the Student				
Name:	Last:	First:	Middle:	Phone (Day):
Former Name:	Last:	First:	Middle:	Phone (Evening):
Mailing Address:			City/Town:	
Province/State:	Postal / Zip Code:	Email:		
About the Proctor				
Proctor Name:	Last:	First:	Middle:	Phone (Day):
Name of educational organization:		Position of Assessor:		Phone (Evening):
Mailing Address:			City/Town:	
Province/State:	Postal / Zip Code:	Email:		
<p>My signature below affirms that I will proctor the Columbia College assessment in accordance with the policy and guidelines supplied by Columbia College.</p> <p>The personal information on this form has been collected for the sole purpose of processing your request. The information is collected in accordance with the Columbia College privacy policy, as well as Alberta Personal Privacy legislation. If you have any questions about the collection or use of this information please contact the Corporate Privacy Officer. This form must be signed before we can process your request</p>				
Signature of Proctor:			Signature Date:	
For Office Use Only				
Received by:			Date Received:	
Processed by:			Processed Date:	
Notes:				