



Protection of Privacy

The personal information collected through the Exam Conflict form is used for students who have two exams at the same time. This collection is authorized by Section 4(c) of the Protection of Privacy Act. For questions about the collection of this personal information please contact Associate Registrar at 403.502.8976, registration@mhc.ab.ca, Medicine Hat College.

EXAM CONFLICT

Conflicts are defined by the Academic calendar. Students have a conflict when:

1. There are two exams to be written on the same time and date.
2. There are three exams on the same date (e.g., AM, PM, and EVE)

Personal Information

Medicine Hat Student ID Number: _____

Last Name: _____ First Name: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Best number to reach you: _____ ☐ Home ☐ Cell ☐ Other

Email address: _____@mymhc.ca

Conflict Information

Date of Conflict: _____

Time of Conflict: ☐ AM ☐ PM ☐ EVE

Course Details

Course One	Course Two
COURSE NAME:	COURSE NAME:
COURSE NUMBER:	COURSE NUMBER:
INSTRUCTOR:	INSTRUCTOR:
Course Three	
COURSE NAME:	
COURSE NUMBER:	
INSTRUCTOR:	

- ☐ I have informed my instructors/an instructor of the conflict already and have made an arrangement to write at a different time
- ☐ I have let my instructors know of the conflict, but do not have an alternative arrangement

Signature

Date

COMPLETE AND SUBMIT TO REGISTRATION