REQUEST FOR FINANCIAL APPEAL

Office of the Registrar Room 1-205, 10215 – 108 Street NW Edmonton, Alberta, Canada T5J 1L6



				FOR OFFICE USE ONLY		
				DATE RECEIVED	ENTERED BY	
PERSONAL DATA: Com	plete all spaces belov	v. If not applicable	to you, ind	icate "N/A"		
NORQUEST STUDENT ID	LAST NAME (LEG	LAST NAME (LEGAL)			FIRST NAME (LEGAL)	
PROGRAM / COURSE	URSE (Term or terms of appeal request i.e.l			DATE		
Home Address						
STREET ADDRESS			APT. N	10.	CITY/TOWN	
PROVINCE	POSTAL CODE	COUNTRY	TELEPI	HONE - HOME	TELEPHONE - WORK	
IMPORTANT NOTE: Not providing supporting documentation for your appeal may result in denial of the appeal or a delay in a decision.						
Describe the reason for the a	ppear:					
Describe what actions have yo	ou taken to resolve th	nis:				
What resolution are you expe	cting from your appea	al?				

What documentation are you providing to support your appeal? (Please list each and attach in support of your appeal)						
Freedom of Information & Protection of Privacy (FOIP) Notification Statement						
The personal information requested on this form is collected under the authority of section 65 of the <i>Post-secondary Learning Act</i> and section 33(C) of Alberta's <i>Freedom of Information and Privacy Act</i> and will be used for the purpose of processing a financial appeal. For information about the collection and use of this information, contact the Office of the Registrar at 10215-108 Street NW, Edmonton, AB, T5J 1L6, Tel. 780.644.6000.						
DECLARATION OF REQUESTOR						
I acknowledge the FOIP statement above, and verify that all information contained on this for documents submitted in support of my appeal are authentic and that no relevant information NorQuest College will notify me regarding the outcome of my appeal with a letter.						
Please email completed form to sf@norquest.ca	DATE					
SIGNATURE OF REQUESTOR (We will accept typed name in lieu of signature if request sent from your NorQuest email account.)						