

REQUEST TO TRANSMIT A FAILING GRADE

The information in **Student information** and **Identification** sections are mandatory prerequisites for Cégep à distance to process your request. This information remains confidential and will only be used for the purpose of evaluating your application.

STUDENT INFORMATION	
Last name: _____	First name: _____
Permanent Code: _____	Telephone: _____
PLEASE TRANSMIT A FAILING GRADE FOR THE FOLLOWING COURSE(S):	
Course number: _____ - _____ - _____	
Course number: _____ - _____ - _____	
Course number: _____ - _____ - _____	
Course number: _____ - _____ - _____	
IDENTIFICATION	
<p>MANDATORY</p> <p>Place a valid identity card with signature in this box (provincial health card, driver's licence or other government-issued identification card)</p>	
SIGNATURE	
Student's signature is mandatory.	
Handwritten signature: _____	Date: _____

Your request must be submitted by e-mail at the following address: infoscol@cegepadistance.ca