

# CAEC Special Arrangement Request Form

Revised November 2024

Ministry of Immigration and Career Training  
1000, 2103 11<sup>th</sup> Avenue  
REGINA SK S4P 3Z8  
306-787-5597 | [caec@gov.sk.ca](mailto:caec@gov.sk.ca)

Special arrangements may be approved to make a candidate feel more comfortable when writing a Canadian Adult Education Credential (CAEC) test. Requested arrangements that impact the integrity of the test or test environment will not be approved.

## Applicant Information

**Name of Applicant** (please print)

**Date of Birth** (dd-mmm-yyyy)

**Phone Number**

**Email**

**Address**

**City/Town**

SK

**Province**

**Postal Code**

**Testing Centre Name**

**Testing Centre Location**

## Requested Special Arrangement

Choose from below:

<b>Type of Arrangement:</b>	<b>Specify as needed:</b>
Extended writing time (to a maximum of double)	
Additional breaks	
Private writing space	
Privacy screens	
Ambient noise	
Noise blockers	
Large print copies of paper tests	
Coloured overlays or paper for paper tests	
Other (please specify)	

### Important note:

To maintain the integrity of CAEC tests, use of a dictionary, thesaurus or translator for the English Reading, Français Lecture, Social Studies, Mathematics, and Science tests is not permitted under any circumstances.

Reason for Special Arrangement: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

# CAEC Special Arrangement Request Form

Revised November 2024

Ministry of Immigration and Career Training  
1000, 2103 11<sup>th</sup> Avenue  
REGINA SK S4P 3Z8  
306-787-5597 | [caec@gov.sk.ca](mailto:caec@gov.sk.ca)

By signing this form, I understand that the Ministry of Immigration and Career Training (the Ministry) will send my request to the CAEC Testing Centre mentioned above.

The CAEC Testing Centre will review my request and advise me of the approval status and the nature of my arrangement. The Testing Centre will email me a copy of my completed form so that I have a record of what has been approved.

By signing below, I agree to the collection, use, and sharing of my personal information and personal health information as described above. This consent will be valid from signing date to the end of the calendar year in which it is signed.

\_\_\_\_\_  
**Applicant Signature**

\_\_\_\_\_  
**Date**

Please submit this form to [caec@gov.sk.ca](mailto:caec@gov.sk.ca) with the subject line Special Arrangement Form. For questions about this form, please call the CAEC Administration Office at 306-787-5597. For questions about the collection, use or sharing of personal information or personal health information or the consent form, please contact the Ministry of Immigration and Career Training Privacy Officer at 306-510-4823.

## CAEC Testing Centre Use Only

	<i>Type of Arrangement:</i>	<i>Requested:</i>	<i>Approved:</i>	<i>Denied:</i>
	Extended writing time (to a maximum of double)			
	Additional breaks			
	Private writing space			
	Privacy screens			
	Ambient noise			
	Noise blockers			
	Large print copies of paper tests			
	Coloured overlays or paper for paper tests			
	Other:			

**Notes:**

\_\_\_\_\_  
**Testing Centre Approver Signature**

\_\_\_\_\_  
**Date**