

## Request for Change in Scheduled Examination

Student: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
(Please Print)

A change in scheduled examinations may be requested using this form for the following situations:

1. A request to take examination with a different section of the same course.
2. **Three** scheduled examinations in **four** consecutive examination periods on consecutive days.
3. A conflict between scheduled examinations.

**All other requests for exam schedule changes may be heard by the Dean of Students, Campus Center 109.**

Please fill out the appropriate section (#1, 2, or 3) and obtain the instructor's signature. Return to Ewell Hall by **Friday, December 2, 2011 before 5:00 p.m.**

1. I am taking \_\_\_\_\_ (course) \_\_\_\_\_ (section), which has two or more sections. Although the final examination for my section is scheduled for \_\_\_\_\_ (date/time), I wish to take the examination with the other section, scheduled for \_\_\_\_\_ (date/time).

**Instructor's Signature:** \_\_\_\_\_ **Print Name:** \_\_\_\_\_

2. I have **three** scheduled examinations in **four** consecutive examination periods on consecutive days, **listed below**. NOTE: You must first attempt to reschedule one of the three exams with another section [see #1]. If none of the three can be taken with another section, **only one exam may be rescheduled**.

Course: \_\_\_\_\_ Section: \_\_\_\_\_ Date/time: \_\_\_\_\_  
 Course: \_\_\_\_\_ Section: \_\_\_\_\_ Date/time: \_\_\_\_\_  
 Course: \_\_\_\_\_ Section: \_\_\_\_\_ Date/time: \_\_\_\_\_

**I wish to reschedule:**  
 Course: \_\_\_\_\_ Section: \_\_\_\_\_ To date/time: \_\_\_\_\_

**Instructor's Signature:** \_\_\_\_\_ **Print Name:** \_\_\_\_\_

3. I have a conflict between these scheduled examinations:  
 Course: \_\_\_\_\_ Section: \_\_\_\_\_ Date/time: \_\_\_\_\_  
 Course: \_\_\_\_\_ Section: \_\_\_\_\_ Date/time: \_\_\_\_\_

**I wish to reschedule:**  
 Course: \_\_\_\_\_ Section: \_\_\_\_\_ To date/time: \_\_\_\_\_

**Instructor's Signature:** \_\_\_\_\_ **Print Name:** \_\_\_\_\_

I certify that, to the best of my knowledge, under the statutes of the Honor Code, my request is a correct and complete representation of the facts.

**Student's Signature:** \_\_\_\_\_ Date: \_\_\_\_\_

**Kelly Joyce, Dean of Undergraduate Studies:** \_\_\_\_\_ Date: \_\_\_\_\_