

REQUEST FOR FINAL EXAM CHANGE



Fill form in completely, listing all information concerning courses with exams scheduled on the same day. List or attach your complete exam schedule – not just the one you are changing. Electronic exams (EE) are not considered a conflict with traditional exams.

- For three exams on the same day, you may change one.
- For four exams on the same day, you may change two.

NOTE: From beginning exam time one day to the same time the next day does not constitute a 24-hour period. (EX: 7:45AM Monday, 2:00PM Monday, & 7:45 AM Tuesday).

If one of your instructors has another section of the same course, ask if you may reschedule the exam and take it with that section. If the instructor agrees, obtain his or her signature in the appropriate space. If no instructor has a section in which you may take the exam, check with your instructors to see which of them is willing to give you a special exam and have that instructor indicate approval.

- Be sure the name and email address of the instructor granting approval is legible.
- Sign the form and submit it to our online form uploader no later than **11:59pm on the university-published deadline:** apps.pamplin.vt.edu/UGForms/General. Forms and instructor approvals can also be emailed to businfo@vt.edu.

STUDENT ID NUMBER	LAST NAME	FIRST	MI	MAJOR
LOCAL PHONE:			EMAIL:	

I request an exam time change based on having three (3) or more exams which take place on the same day.

I request an exam time change because of conflicting exam times.

NOTE: This form should only be used for changing exams due to 3 or more within a 24-hour period or exam conflicts. The Associate Dean of Undergraduate Programs will not approve an exam change due to travel, business, or family plans. It is at the discretion of the instructor to change an exam time for personal reasons.

List all of your courses and exam information. **You only need to obtain approval for the exams you are changing.**

DEPARTMENT	COURSE #	CRN #	CURRENT EXAM DATE/TIME	NEW EXAM DATE/TIME	INSTRUCTOR'S NAME	INSTRUCTOR'S SIGNATURE
Example: MATH	1525	12345	MON.,5/5/18, 1:05 PM	TUE.,5/7/18, 9:00 AM	Dr. John Doe	

*I certify that the information provided is correct, and I understand that misrepresentation may constitute an Honor System violation.

_____ STUDENT SIGNATURE	APPROVED <input type="checkbox"/> DENIED <input type="checkbox"/>	_____ ASSOCIATE DEAN FOR PAMPLIN UG PROGRAMS
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