## **EXAM-RESCHEDULING REQUEST**

COMPLETED FORM MUST BE SUBMITTED TO LAUREN THOMPSON OR AMY WEAVER IN THE DEAN'S OFFICE BY 5:00 PM ON TUESDAY, APRIL 11, 2023.

Name:	UGA Email Address:		
Reschedu	uling Request Due to Cor	flicting	<u>Exams</u>
Please list your conflicting exams, alor signature of the professor who has ag please state on the instructor-signature.	greed to have their exam rescl		
Course/Exam:	Dat	e:	Time:
Course/Exam:	Dat	e:	Time:
Exam being rescheduled:			
Instructor's signature (granting permiss	sion):		
<u>Reschedulir</u>	ng Request for Other Exc	<u>eptional</u>	Reasons
Please identify the course/exam that you exam. You must also explain the basis for please state on the instructor-signature	or your request or attach an ex	-	
Course/Exam:	Dat	e:	Time:
Basis for request:			
Instructor's signature (granting permiss	sion):		
Rescheduled Exam Date: Please in scheduled makeup exam days. Your ma	•		
Thurs, May 4 at 1:30pm – Conflict:	Mon, Ma	y 8 at 1:30	Opm – Conflict:
Fri, May 12 at 9:00am – Conflict:			Dam – Conflict:
I understand Honor Code obligations with students who have taken it befo			
STUDENT SIGNATURE		DATE	
APPROVED:			
ASSOCIATE DEAN FOR A	CADEMIC AFFAIRS	DATE	
DESCRIPTION OF THE PARTY.			

Please ensure that your request falls within the <u>exam rescheduling parameters</u> outlined in the Student Handbook. Requests will not be considered until after April 11, 2023.