

## Request to Reschedule a Final Exam

Due Date: Two Weeks Before Scheduled Exam

*(Date varies each semester – see Academic Calendar)*

**A COPY OF THE STUDENT'S CLASS SCHEDULE FOR THE TERM MUST BE INCLUDED WITH THIS FORM FOR THE REQUEST TO BE PROCESSED.**

### **Student Information:**

Name \_\_\_\_\_ UPIKE ID# \_\_\_\_\_

Mailing Address \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

Class (Circle one) FR SO JR SR Major \_\_\_\_\_

*If a UPIKE undergraduate student is scheduled for more than two final exams on the same day, excluding evening or online exams, the student may request their individual final for the class with the highest catalog number be rescheduled. (EX: A student has three final*