

School of Physics and Astronomy

Make-Up Exam Request Form

Disclaimer: Submission of this request is in no way a guarantee that it will be approved. Each request is considered on an individual basis by the Head of Physics & Astronomy.

This form must be filled in completely and submitted in a timely fashion electronically (as an email attachment) to BOTH your instructor AND the Physics & Astronomy central office:

School of Physics and Astronomy
Room CAR-1258 cadse@rit.edu

Name of Student Requesting Make-Up Exam: _____

Name of Instructor: _____

Semester (Fall or Spring): _____ Course Number: _____ Section Number: _____

Date and Time of Missed Scheduled Exam (Future or Previous): _____

Below, clearly state your reason for missing the exam and requesting a make-up. Include all details pertinent to the request. It is essential that you submit relevant documentation with this form in support of your request:

If submitted as hard copy, student must sign and date here:

Signature

Date

(If submitted electronically, email date/time stamp serves as student's signature.)

Student's Email to Which Response Should Be Sent:
(Instructor will also be copied on school head's response)