



A student who is absent from a final examination through no fault of his or her own, for medical, compassionate, or other valid reasons, may apply to the college for a deferred exam. This application, with supporting documentation, must be returned to the College of Nursing within three (3) working days of the missed examination. The College will notify the student and the instructor of its decision within ten (10) working days of the close of the examination period. The college will also notify the student and Student Enrolment Services Division if permission is granted.

To be completed by the student:

Name \_\_\_\_\_ NSID and Student Number \_\_\_\_\_

Course Name, Number and Section \_\_\_\_\_ CRN# \_\_\_\_\_

Instructor \_\_\_\_\_ Date of Originally Scheduled Exam \_\_\_\_\_

Is this a pre-requisite for a course you are currently registered in? Yes [ ] No [ ]

If yes, what class? \_\_\_\_\_ In order to continue in this course, a passing grade must be obtained in the course in which the deferred exam is written.

Reason for Request (please attach supporting documentation) \_\_\_\_\_

This is a request for a deferred examination (fee of \$40.00). [ ]

This is a request for a special deferred examination (fee of \$80.00). [ ]

The fee will be billed to your student account.

Date \_\_\_\_\_ Student Signature \_\_\_\_\_

To be completed by the instructor:

- 1. Has the student completed the term work, assignments, essays, laboratory work, etc. required to complete the course?
2. If the answer to 1. is no, have satisfactory arrangements been made to complete the required work?
3. What is the year's mark in the course to date?
4. What is the value of the final examination in this course?
5. Please feel free to contact the Associate Dean if you have additional remarks concerning this application. However, please complete and submit this form according to the usual procedure.
6. Do you support this request?

A student, who by reason of continuing illness or other valid considerations, is unable to write during the regular deferred examination period, may apply to the College for permission to write a special deferred examination. If special deferred - date, time and place to be written to be determined by instructor and student.

Date \_\_\_\_\_ Instructor's Signature \_\_\_\_\_

To be completed by the Associate Dean:

Regular Deferred Examination Granted \_\_\_\_\_ Denied \_\_\_\_\_
Special Deferred Examination Granted \_\_\_\_\_ Denied \_\_\_\_\_

Date \_\_\_\_\_ Signature \_\_\_\_\_