Name:____________________________________ Student ID M# _______________________
(Please print)

Year (circle one):  1L    2L    3L    Special Phone: (home) ____________ (cell) ____________

I request that my ___________________ exam be deferred to _____________________

Reason for Request:

_____ Two exams scheduled on the same day (list both exams)
   1. _______________________________ 2. _______________________________

_____ Three exams in a row
   1. ___________________ 2. _____________________ 3.__________________

_____ Other (please explain:
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________

Student Signature _____________________________ Date: ________________________

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<thead>
<tr>
<th>Action on Request:</th>
<th>Denied</th>
</tr>
</thead>
<tbody>
<tr>
<td>Approved:</td>
<td>Other</td>
</tr>
<tr>
<td>For the College:</td>
<td>Date:</td>
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