

EXAM ACCOMMODATION FORM

Student Information:

Date:	Phone Number:
Student Name:	Student #:
Student Email:	

Exam Information:

Course: _____ Instructor: _____
First Name Last Name

Exam Date: _____
Day Month Date Year

Class Exam Start Time: _____

Different Start Time: _____

You need to write your exam at a different time because:

Add YES or NO in the box you need:	
Class schedule does not allow extra time	
Exam being split over several seatings	
Must attend lecture or return to finish lecture	
Other – explain:	

Testing Help or Accommodations listed on your letter:

Exam accommodation – Please select:		Ergo Chair	
Extra Time		Adjustable Table	
Computer		Other – explain:	

For Administrative Use

Accommodation letter		Request exam from instructor	
Matilda		Exam received	