

**APPLICATION FOR
DEFERRED FINAL EXAMINATION FORM**

An exam **may ONLY** be deferred based on documented illness or severe personal difficulty. **Please submit this form and supporting document(s) to info@stmu.ca. Deadline for submission is no later than 24 hours after the scheduled exam.**

**** Misreading the exam schedule and/or travel plans are not a valid reason to miss or defer a scheduled exam****

SECTION 1: To be completed by the student					
STUDENT INFORMATION					
Student ID #	0	0	0	0	
Last Name			First Name		
StMU Email					
EXAM INFORMATION					
Course Code (e.g., SOCI 201)	Section No. (e.g., 1)	Exam Date		Exam Time	Professor
EXAM DEFERRAL REASON					
I am requesting to defer for the following reason and have attached supporting documentation (e.g., Doctors note for documented illness, letter briefly describing personal difficulty):					

Declaration:

I have read and understand the policy for deferred examinations as outlined in the [University Calendar](#).

Student Signature _____

Date _____

SECTION 2: To be completed by the Associate Registrar, Student Accounts, Systems & Reporting			
Date Received	Exam to be moved	New date and time of exam	New exam location
Student Notified	Instructor Notified	Notes (if applicable)	

Privacy Statement:

The personal information collected on this form will be used for the purpose of providing services to students and maintaining student records. The information is collected, used, disclosed and protected in accordance with Alberta's Personal Information Protection Act and St. Mary's University Privacy Policy. If you have any questions about the collection and use of this information, contact the Privacy Officer at 403.254.3132 or privacy@stmu.ca.