Student Request for Variance from Course Outline

Course______Student’s Name ___________________________ ID __________

All requests for changes from a course outline must be approved. This includes, amongst others, deadlines for assignments, examination times and conditions.

☐ Extension for assignment until ______________________________

☐ Change from scheduled examination time to ______________________________

☐ Change from examination conditions, i.e. from written to oral exam

☐ Change in mark allocation, i.e. change in weighting of assignments

☐ Other ______________________________________________________

Please outline your reasons for this request.

_________________________________________________________________

_________________________________________________________________

Date ___________ Student’s Signature ______________________________

Student’s E-mail Address: _________________________________________

Student’s Phone Number: _________________________________________

Faculty Member Comments:

_________________________________________________________________

_________________________________________________________________

Decision: ☐ Approved ☐ Refused

Date: _______________ Faculty Member Signature ____________________

Note: A copy of this form should be retained by both the student and the faculty member.