Request to Reschedule Finals

Date: __________________________

Name: __________________________ PeopleSoft: __________________________

E-Mail: __________________________ (Please Write Clearly)

Final Conflict Information*  (Office Use Only)

<table>
<thead>
<tr>
<th>Course Name/Number &amp; Section (ENGL 1010 001)</th>
<th>Time (MM/DD/YY @ 1:00pm)</th>
<th>Course Instructor Name</th>
<th>Approve/Deny</th>
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*Please note that if you have three finals in one day, it is the MIDDLE final that will be rescheduled.

Reason for Conflict (if you have an extenuating circumstance please attach documentation that indicates why you may be unavailable to attend your final exam)

__________________________________________________________________________________________
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OFFICE USE ONLY:

Please note on the student’s schedule listed above which classes have been approved for rescheduling.

Signature: __________________________  □ CMHS  □ CSD

(Director of Student Services or Designee)

Notes:________________________________________________________________________________
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