

Make-Up Exam Cover Sheet

Options for submitting this form.

1. Upload and attach your exam then click the submit button.
2. Print the form and return it along with the exam to MP 404.

Instructor Name:
Student Name: (Student MUST have ID to take exam)
Date and Time exam will be given:
Time allowed to take exam:
Materials allowed: (notes, calculator, books, etc.)
Last Day and Time student may take the exam:
Comments:

NOTE: Frequently students want to reschedule the exam for another day or time. We will not allow the student to take the exam after the last day written above.