EXAM CONFLICT FORM

Students with two exams scheduled on the same day must complete this form and submit it to Melissa Mundt's Office (#214) no later than March 1, 2019. Students will be notified of their rescheduled exam date, which will be scheduled as soon after the original exam date as possible, by Academic Services. No exam will be given before the scheduled date.

NAME______ DATE_____

STUDENT ID #EMAIL		EXAM 7		
		PHONE		
1. Are yo	u taking exams by laptop? YES	NO		
2. Please	list the two exams that meet on the sam	e day:		
	EXAM CONFLICT S	SCHEDULE		
EXAM DATE	COURSE NAME	SECTION #	PROFESSOR	
Honor Code S	Statement: Please read and sign before	form is submitted.		
I state on my huse of unautho	nonor as a student that: I have neither giverized aid.	ven or received, nor	have I tolerated others'	
,	, I will not discuss the contents of an ex- nination as prohibited by the Valparaiso		•	
Student Signature:		Date:		