

# EXAM CONFLICT FORM

An examination conflict exists when a student has two examinations with starting times that are less than 24 hours apart. **Students with an examination conflict must complete this form and return it to the Vice Chancellor for Academic and Student Affairs no later than three weeks prior to the beginning of the applicable examination period in office 220/221.**

Student Name \_\_\_\_\_ Student # \_\_\_\_\_

Cell Phone \_\_\_\_\_ E-mail Address \_\_\_\_\_

## EXAM TO BE RESCHEDULED

Below please **list all examinations** in the date and order that they occur. Then, in the space below the examination schedule provide information about the examinations that conflict with each other. **All make-up examinations will be administered in accordance with the examination schedule for the applicable examination period.**

### Examination Schedule

Course # and Name	Professor	Exam Date	Exam Time

### Conflicting Exams

Course Names/Professors: 1) \_\_\_\_\_  
2) \_\_\_\_\_

Will you be using Exam4 to take the exam? \_\_\_\_\_ Yes \_\_\_\_\_ No

### Honor Code Statement: You must read and sign the below statement.

I hereby attest that I will uphold the honor code of Southern University Law Center regarding the taking of examinations. I state, on my honor, that I will not discuss the examination with anyone who has taken or seen the examination and that I have no advance knowledge of the contents of the examination. I further attest I will not discuss this examination until all students have taken it. I attest that I will follow the instructions contained in the examination.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

### Request to Reschedule Exam:

Granted \_\_\_\_\_ Denied \_\_\_\_\_

\_\_\_\_\_  
Vice Chancellor for Academic and Student Affairs