OPTION SHEET FOR ACADEMIC ADJUSTMENTS ON EXAMS  
Department of Mathematics – Summer 2009  

This form must be submitted to MATH 242 at least 7 days before each exam

PART 1: Fill out  
Select the exam for which you are filing for accommodations (circle only one):  

exam 1  exam 2  exam 3  final exam  

Date of the regular exam:  
Time of the regular exam:  

LAST NAME:  
FIRST NAME:  

STUDENT I.D. #:  
EMAIL ADDRESS:  

COURSE:  
course number  section  
INSTRUCTOR NAME:  

PART 2: Fill out appointment information. Mark one box; read the statement; sign and date.  

For either testing option, students must make an appointment with the Testing Center in Schleman Hall (49–41146) and fill it out below.  

Date of appointment:  
Time of appointment:  

☐ I will take the same exam at approximately the scheduled time but with academic adjustments at the Testing Center.  

☐ Due to an exam conflict/excused absence I have been approved by my instructor to take an alternate (make-up) exam with academic adjustments at a time and/or day I have arranged at the Testing Center in accordance with any deadlines specified in Part 3.  

I understand that, in order to get the adjustments I am entitled to, I have to take the exam in the location specified above, and that it is my responsibility to know where and when the exam is. I also understand that, in order to receive alternate testing conditions, it is my responsibility to follow the procedures and meet all the deadlines as explained in the "Information Sheet" (available from MATH 242) and that late "Option Sheets" might not be accepted.  

Student's Signature:  
Date:  

PART 3: Have your instructor complete this section.  

Instructor Signature:  
Date:  

If for an alternate exam, specify any deadline which applies:  

Sample Only