



University of Connecticut School of Law
Office of the Associate Dean
55 Elizabeth Street
Hartford, Connecticut 06105
860/570-5130
860/570-5128 (fax)

Exam Deviation Request

A student may apply to take an examination at a time other than that for which it is regularly scheduled only when facing an unforeseeable hardship such as a medical problem, a death in the family, etc. The completed application should be submitted to the Associate Dean for Finance and Administration, Chase 104. Students must be available during the entire exam period, day and evening.

<u>TERM</u>	<u>DEVIATION REQUEST DUE DATE</u>	<u>TAKE HOME EXAM PERIOD</u>	<u>PROCTORED EXAM PERIOD</u>	<u>DEVIATION DATES</u>
Fall 2008	November 7, 2008	December 8-18, 2008	December 9-19, 2008	December 19, 2008
Spring 2009	March 27, 2009	May 5-13, 2009	May 6-13, 2009	May 14, 2009 (Upperclass) May 18, 2009 (1L Division)
June 2009	June 12, 2009	June 19-22, 2009	June 22, 2009	June 29, 2009
July 2009	July 24, 2009	July 31-August 3, 2009	August 3, 2009	August 4, 2009

Name: _____

Signature/Date: _____

Day Time Phone: _____

May we leave a message at this number: Yes No

Program/Division:

- | | | | |
|--------------------------|------------------------|--------------------------|-----------------------|
| <input type="checkbox"/> | JD – Day Division | <input type="checkbox"/> | JD – Evening Division |
| <input type="checkbox"/> | LLM – US Legal Studies | <input type="checkbox"/> | LLM – Insurance Law |
| <input type="checkbox"/> | Non Degree – Exchange | <input type="checkbox"/> | Non Degree – Visiting |

Expected Graduation: _____ (Month/Year)

Reason for Deviation Request:

Illness (Doctor's Note to be Attached) Other (Explanation to be Attached)

Please Indicate your ENTIRE Examination Schedule Below:

<u>COURSE</u>	<u>INSTRUCTOR</u>	<u>EXAM DATE</u>	<u>EXAM TIME</u>	<u>REQUESTED METHOD OF EXAM</u> (Laptop/Written)
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

For Administrative Use Only:

Course: _____ Instructor: _____ S D

Date: _____ Time: _____

Location: _____