

Bachelor of Health Sciences (Honours) Program
REQUEST FOR EXAM DEFERRAL
Queen's University

Bachelor of Health Sciences (Honours) Program Office

bhsc@queensu.ca

613-533-2566

Botterell Hall, Room 815

18 Stuart Street

Kingston, ON

K7L 3N6

For students who wish to request a deferred examination, the instructor may require a written appeal and/or medical certificate or other documentation that demonstrates extenuating circumstances. Permission may be granted to postpone an examination for a period no later than the end of the following academic term and should be given to the student in writing. If the student's interim grade is a fail, the mark IN should be entered when the instructor has given the student permission to write a deferred examination. If the student's interim grade is other than an F, then the student's interim grade should be entered. If the instructor does not submit a revised mark by the end of the next academic term either the interim grade will stand or the IN notation will be removed and a grade of F will become the final mark for the course. Any further deferrals will require an appeal to the Associate Director (Studies).

Name:	<input type="text"/>	Level of Study:	<input type="text"/>
Student #:	<input type="text"/>	Learning Track: (if Applicable)	<input type="text"/>
Email:	<input type="text"/>		
Course:	<input type="text"/>		
Term:	<input type="text"/>		
Instructor:	<input type="text"/>		

Having been granted permission to write an examination at a time other than the regularly scheduled time, I hereby confirm that I will not undertake any form of communication concerning the examination with anyone at any time. I understand that any breach of the terms of the Confidentiality Agreement shall be regarded as a **serious academic offense** and may result in academic sanctions and in disciplinary proceedings.

Student Signature:	<input type="text"/>	Date:	<input type="text"/>
Instructor Signature:	<input type="text"/>	Date:	<input type="text"/>
Associate Director (Studies) Signature:	<input type="text"/>	Date:	<input type="text"/>