

# Learning Center Final Exam Student Accommodation Form 635, 1\*

Please complete a section of this form for each exam you will be taking in the Learning Center.

**You MUST get your professor's signature.**

Complete ALL Information with your PROFESSOR so we may provide you with any necessary assistance.

Please call us at 757-233-8702 if you have questions!

Name: \_\_\_\_\_ Course/Subject: \_\_\_\_\_ EXAM #1

Professor: \_\_\_\_\_ Professor ¶ V 6 L J Q D W X U H B B B B B B B B B B B B B B B B I

Please circle the date and time the student will be taking the exam:

0 D \ <sup>th</sup> ( ) U L.)      0 D \ <sup>th</sup> ( 6 D W.)      0 D \ <sup>th</sup> (Mon.)      0 D \ <sup>th</sup> (Tues)  
8-10:30am    11:30am-2pm    3-5:30pm

Questions for the Professor:

x Computer Needed: Yes  No

x Any Special Instructions (Unlimited Time, Open/Closed Book, Calculator Allowed, etc.)?

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Name: \_\_\_\_\_ Course/Subject: \_\_\_\_\_ EXAM #2

Professor: \_\_\_\_\_ Professor ¶ V 6 L J Q D W X U H B B B B B B B B B B B B B B B B I

Please circle the date and time the student will be taking the exam:

0 D \ <sup>th</sup> ( ) U L.)      0 D \ <sup>th</sup> ( 6 D W.)      0 D \ <sup>th</sup> (Mon.)      0 D \ <sup>th</sup> (Tues)  
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