

**Exam Variance Request**

Date Requested \_\_\_\_\_

Name \_\_\_\_\_

Telephone # \_\_\_\_\_

WSU Email \_\_\_\_\_

Variance is for  Time/Date Change

Accommodation added time  1.5x       2x (please check one)

Reason

Approved by

**Felicia Thomas, Assistant Dean of Student Affairs**

**Course Name** \_\_\_\_\_

Professor's Name \_\_\_\_\_

Scheduled Date and Time \_\_\_\_\_

Approved Date and Time \_\_\_\_\_

**Course Name** \_\_\_\_\_

Professor's Name \_\_\_\_\_

Scheduled Date and Time \_\_\_\_\_

Approved Date and Time \_\_\_\_\_

**Course Name** \_\_\_\_\_

Professor's Name \_\_\_\_\_

Scheduled Date and Time \_\_\_\_\_

Approved Date and Time \_\_\_\_\_

**Course Name** \_\_\_\_\_

Professor's Name \_\_\_\_\_

Scheduled Date and Time \_\_\_\_\_

Approved Date and Time \_\_\_\_\_