Wayne State University Law School Exam Variance Request for ____________ (Fall/Winter/Summer) 20___

The Law School’s Academic Regulations permit variances from the regularly scheduled time and date for an exam ONLY under the following circumstances:

(1) A student has two examinations scheduled at the same time on the same day;
(2) A student has three or more final examinations scheduled within a single 24-hour period;
(3) Other extraordinary circumstances. Variances based on a disability or ESL accommodation will be considered granted under “other extraordinary circumstances”.

A variance request must be submitted to the Office of Student Academic Affairs EACH SEMESTER for which a variance is requested for any exam.

**Student Name and Wayne Access ID (print):** ________________________________

**Student Contact Telephone Number and Wayne E-Mail:** ________________________________

<table>
<thead>
<tr>
<th>Course Name</th>
<th>Professor</th>
<th>Scheduled Exam Time/Date</th>
<th>Requested Exam Time/Date/Other Variance*</th>
<th>Reason for Variance Request (attach relevant documentation if preferred)</th>
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* If requested variance is only additional time, please indicate: ☐ 1.5x ☐ 2x ☐ other: _____________________

By signing below, I certify that I meet the requirements stated above to qualify for an exam variance.

**Student Signature:** ________________________________ **Date:** __________

**Approved:** ____________________________________________

__________________________, Assistant Dean of Student Affairs

Notes: Office Use Only

Revised 12/5/2019