## Learning Center Final Exam Student Accommodation Form SPRING 2024

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:				<b>EXAM #1</b>
	r:Professor's Signature:				
Please	circle the date and	time the student	will be taking the	he exam:	
May 10 <sup>th</sup> (Fri.)	May 11 <sup>th</sup> (Sat.)	Мау	13 <sup>th</sup> (Mon.)	May 14 <sup>th</sup> (Tues)	
	8-10:30am	11:30am-2pm	3-5:30pm		
Questions for the Pro	ofessor:				
Computer Need	led: Yes	No			
Any Special Ins	structions (Unlimite	ed Time, Open/CI	osed Book, Ca	alculator Allowed, e	tc.)?
Professors nie	ease don't forget to h		the I earning Ce	nter ~Thank you	
Professors, pla	ease don't forget to b	oring the exam to t	the Learning Ce	nter. ~Thank you	
					EXAM #2
Name:	Co	ourse/Subject:			EXAM #2
Name:	Co	ourse/Subject: ofessor's Signatu	ıre:		EXAM #2
Name: Professor: Please	Co Pro	ourse/Subject: ofessor's Signatu time the student	ıre:will be taking t	he exam:	
Name: Professor: Please	Co Pro circle the date and May 11 <sup>th</sup> (Sat.)	ourse/Subject: ofessor's Signatu time the student	ure: will be taking the 13 <sup>th</sup> (Mon.)	he exam:	
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