

Deferred Examination Request										
STUDENT INFORMATION										
Student Name			Student ID Number							
		G								
Telephone Number	Date & Time of Exam									
Term	Professor									
Course Number (CRN)	Course Name									
I request permission to defer the above stated ex	camination for the follo	wing r	easons	: (All s	suppo	rting o	locum	entatio	on mus	st be
attached to this form).										
Are you a graduating senior or a bar candidate?	☐ Yes ☐ No									
The you a graduating senior of a our candidate.	163 110									
Approved deferred examinations must be taken registered and in which the course is offered.		mester	or ses	ssion f	or wh	ich th	e stud	lent is	1	
A student who must take the deferred examination from a different professor may attend that professor's class if (s)he										
obtains permission in advance from the professor									be	
auditors. Do not register for the class again	a. The incomplete w	ill be	remov	ved in	the 1	erm	which	ı you		
originally enrolled in the course.										
If the deferred examination is not taken at the designated time or an "Incomplete" has been on the transcript for										
one year without removal:										
 "Incomplete" will be removed Grade of "WF" will be entered on the permanent record 										
3. "WF" will be counted in comput			e avera	age						
I understand that the deferred exam will be a										
require me to take another professor's exam in this course, and it may also require me to adjust my schedule to make certain there is no exam conflict between this deferred exam and my other exams. I further understand that a fee of										
\$50 will be assessed for each deferred examin		ny ounc	т схаг	115. 1 1	ui tiic	unu	ei stan	u ma	i a icc	OI .
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Signature				D	ate _					
Please mail or fax completed form to: South Texas College of Law Houston 1303 San Jacinto Street Houston, TX 77002 Attn: Registrar's Office										
Fax:(713) 646-2939 Email: registrar@stcl.edu		x //002	Attn: I	kegistra	ir's Off	ice				
rax.(713) 040-2333 Eman: registrar@stcf.edu										

FOR	OFFI	CE	USE	ON	$\mathbf{L}\mathbf{Y}$
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□ Approved	Registrar Signature:
□ Not Approved	
Processed by:	Date:/