

Date: \_\_\_\_\_

## **FINAL EXAMINATION CONFLICT FORM**

Name:		LSU Work	LSU Workday ID Number:				
College:	ENGR	ENGR					
Email:		Phone Number:					
Γο Instructor	r:						
within a 24-h required, the authorized gr	hour period (Example: 1st exam see 3 exams/24 hrs. request coverse group exam and a non-group exam of the exams may be moved.	10:00 a.m. N s <b>more than</b>	Monday – next 2 on 7 hours	exams must begin B sework. In the event	BEFORE 10:00 a.m t of a conflict bet	<i>n. Tuesday</i> ). As tween an	
Γhe College α pelow wit <b>h a</b>	of Engineering Student Services a star.	Office has a	ipproved the requ	uest for a change in	time for the exa	m(s) indicated	
	N DATE ORDER ( <mark>EARLIEST FIRST</mark> ITH A "G" ANY GROUP EXAMS (				DATE & TIME BE	LOW &	
GROUP (	(G) COURSE & COURSE NUMBER	SECTION	CREDIT HOURS	DATE OF EXAM	TIME	OF EXAM	
			1	<u> </u>			
<u> </u>							
	final exams will be required to ference to reschedule below:	change first	t. If no group exa	ım exists, you may l	list the courses in	n the	
	1 <sup>st</sup>	2 <sup>nd</sup>		3 <sup>rd</sup>			
	tructors concerned may have ad						
	all arrangements completed by final exam period. It is the stude						
The above	e student has approval to resche	dule the fina	al exam in:		*		
Approved	d:						
	·	ıdent Servic	es, College of Eng	gineering			