



Students with two exams scheduled on the same day or four exams scheduled on consecutive days may reschedule one exam. As a general rule, no conflict exists for an exam scheduled the same day a take-home exam is distributed or due. Early exams are not permitted. **Forms are due by 4:00 p.m. on Wednesday, April 6, 2022 to Law Records** (Room 349) in person or to lawrecords@loyno.edu. Accommodated students should also submit their forms to Law Records per the instructions above.

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
 Name CWID Cell Phone Loyola e-mail

**Exam to be Rescheduled**

At the bottom of this form list all exams in date order. Then, in the spaces below this paragraph provide information about the exam to wish to reschedule. Makeups will be scheduled at 9:00 AM on May 9-11, 2022. **You should schedule your makeup exam for May 9;** May 10 and May 11 are reserved for those students with more than one exam conflict. Early exams are not permitted.

**\*\*1L elective makeup exams (for all elective courses except Torts II) will be scheduled for Monday, May 9 at 9:00 AM.\*\***

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
 Course Name Exam or Make-up Date & Time Professor

Reason 1: Two exams on same day Four exams on consecutive calendar days

Reason 2: Other (Associate Dean of Academic Affairs Signature Required)

Explanation \_\_\_\_\_  
 \_\_\_\_\_

**Honor Code Statement: Please read and sign before form is submitted.**

I hereby attest that I will uphold the Honor Code of Loyola University New Orleans College of Law regarding the taking of examinations. I state, on my honor as a student, that I will not discuss this exam with anyone who has taken or seen the exam.

\_\_\_\_\_/\_\_\_\_\_  
 Student Signature Date

**Exam Schedule**

List all exams in date order. Use the original date of each exam, not the make-up date.

Exam	Instructor	Course	Exam Date	Exam Time
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**Honor Code Statement: Please read & sign on the day of the make-up exam.**

I state, on my honor as a student, that I have not discussed this exam with anyone who has taken or seen the exam and I have no advance knowledge of the contents of this exam. I further attest that I will not discuss this exam until such time that all students have taken the exam. I swear that I will take no more than the allotted time to write this exam and that I will do nothing not permitted by the instructions contained in this exam.

\_\_\_\_\_/\_\_\_\_\_  
 Student Signature Date

Granted Denied Associate Dean of Academic Affairs Date:

Programmed Date: \_\_\_\_\_ / Time: \_\_\_\_\_ / By: \_\_\_\_\_