INTERDISCIPLINARY HEALTH PROGRAM (IHP)
DEFERRING EXAMINATIONS – INFORMATION FOR STUDENTS

Deferring an examination is a privilege and may not always be granted.

1. Deferred exams may be granted to students who are unable to write a final exam at the scheduled date and time for medical, compassionate, or special reasons if the application for the deferred exam is accompanied by supporting documentation that confirms the student’s incapacity to write on the scheduled exam date(s).

2. Students must apply for a deferred exam within 48 hours of the missed exam. If more than one exam is missed, the deferral application must be submitted within 48 hours of the last exam missed. A deferred exam is not granted until documentation is complete.

3. Retroactive deferred exams (where the exam has already been written) are not permitted.

4. Documentation in support of the request for deferred exam must meet the following requirements:
   a) Be an original; copies of the document will not be accepted. If the original is needed for other purposes, a copy will be made and retained in the IHP Office;
   b) Specifies that the exam was missed for the reasons noted;
   c) Dates on the documents must cover the date(s) of the missed exam;
   d) Be an official document, for example: medical certificates, police reports, counselling/treatment lotter, obituary, death certificate, legal documents, etc.

5. Documentation submitted may be subject to confirmation by the IHP Office. Falsification or fabrication of documentation will result in academic suspension for disciplinary reasons. Other penalties may also apply.

6. Students who miss one exam and write another exam on the same day must obtain detailed documentation that explains/confirms inability to write one and not the other.

7. If a request for a deferred exam is approved:
   a) You must check with the department(s) or instructor(s) immediately to determine when you will write the deferred exam, unless the date and time is given at the time of deferral approval.
   b) Official confirmation of the date of the deferred examination will be provided to you by the IHP Office once approved. If you do not receive such confirmation by the date noted on the reverse, you must contact the IHP Office directly for confirmation.
   c) You must discuss any examination format or content changes with your instructor between the original writing and the deferred examination.

8. If a request for a deferred exam is denied, you may appeal such decision in accordance with the academic appeal procedures applicable to your program.

ACKNOWLEDGMENT

Signing the deferral form indicates that the student has read and understood the conditions of the deferral privilege, which is in accordance with the University of Manitoba’s Undergraduate Academic Calendar.

I, ____________________________, confirm that I have read and understood these instructions.

(Please Print)

(Signature)                      (Student #)                        (Date)
APPLICATION FOR DEFERRED EXAMINATIONS
For courses taken in: Summer 20___ Fall 20___ Winter 20___

<table>
<thead>
<tr>
<th>Last Name:</th>
<th>First Name:</th>
<th>Student #:</th>
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Address:                      Postal Code:

Phone:                        UofM Email:

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<tr>
<th>COURSES</th>
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<tr>
<td>Subject Code &amp; Course #</td>
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Fill out your grades below. The status of your course work will be a factor in determining whether you are eligible for a deferred exam. Professors may be consulted to confirm.

<table>
<thead>
<tr>
<th>Course</th>
<th>Assignment</th>
<th>Assignment</th>
<th>Mid Term</th>
<th>Participation and/or Lab</th>
<th>Other</th>
<th>% Final Exam is worth</th>
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Reason for deferral request: MEDICAL □ COMPASSIONATE/PERSONAL/SPECIAL □

Have you been granted a deferred exam before? Yes □ No □

Are you applying to redefer an exam? Redeferral Yes □ No □

Do you have any outstanding term work in the above courses? Yes □ No □

Do you plan to graduate this term? Yes □ No □

Earliest date you will be able to write the examination, based on your documentation? _________________

THIS SECTION IS TO BE COMPLETED BY IHP ADVISOR:

Should you not receive your official notice of examination by _________________ you must contact the IHP advisors immediately. Failure to receive official notification is not grounds for a redeferral.

☐ Granted  ☐ Not Granted

Comments:____________________________________________________________________________________
_______________________________________________________________________________________________
_______________________________________________________________________________________________
_______________________________________________________________________________________________

Advisor’s Signature ___________________________ Date: _______________ Copy given to student: _______