DEPARTMENT OF COMPUTER SCIENCE

University of Manitoba

Application for Pre-appeal Final Examination Viewing Submit <u>separate</u> form for each Exam

Applicant's Name:		Applicant's Student Number:
Course Number:	Section:	Course Instructor:
Date:		Student U of M E-Mail:
Viewing Dates: To be set up with	Advisor	Viewing Location: E2-445 EITC
 This application form must be received in the Dept of Computer Science general office, E2-445 EITC no later than 5 days before the viewing dates. There will be no exceptions made for late submissions. When the form is submitted the student will sign up for a particular time slot in which the exam(s) will be viewed. You will be provided with a photocopy of your exam answers, and of the question paper if that is a separate document. Answer keys will be provided only if they are specifically authorized by the course director. Your final exam must be reviewed at the selected day and time. A maximum of 25 min will be allowed for viewing each examination. You will review the exam in the presence of a invigilator and not your course instructor. The invigilator will not consult with students on the course material, and will not normally be familiar with it. The purpose of viewing final exams is not to negotiate the marking of the exam. The only exception is an obvious case of incorrect addition, whereby the invigilator should be informed and will forward the information to the instructor. You may formally appeal your final exam mark through the Registrar's Office. You are not permitted to make copies of, or take information from, the exam paper, by any means. Writing materials, cameras, cell phones, and any type of recording devices are not allowed. Possession of these restricted devices contravenes the University Student Discipline By-law. All exam papers must be returned to the invigilator who will record the receipt of the exam paper upon your exit from the viewing session. Your student card must be presented when presenting this application form, and also when you arrive to view the exam. Email the completed form to queries@cs.umanitoba.ca or drop it off in person at E2-445 EITC. I have read, understood and accept the 'Conditions of the review of final examination script' listed above: Authorized Signature:		
Receipt: This receipt must be pre	esented along with	your student card at the time of exam review.
Applicant's Name:		Applicant's Student Number:

Section: ____ Course Instructor: ____

Authorized Signature:

Course Number: _____

Applicant's Signature:

Date:_____