

University 1 Deferred Exam Application

Submit your deferred exam application(s) and supporting documentation to fycentre@umanitoba.ca and call us at 204-474-6209 to meet with an academic advisor within 48 hours of the missed final exam, as per [UM's Deadline to request deferral](#). All sections must be completed.

1. Student Information

Last Name: _____ First Name: _____
Student #: _____ Phone #: _____
UM Email: _____@myumanitoba.ca

2. Exam Requested for Deferral

Term:	Fall 20	Winter 20	Summer 20		
Course (e.g. BIOL 1020)	Section (e.g. A01)	CRN (#####)	Instructor	Date & Time of Original Exam	

3. Current Grades

Indicate your current academic standing by providing your marks for assessment items in the course. How much is the final exam worth? %

What were you marked on? List all quizzes, essays, tests, etc.	How much was it worth toward your final grade (%)	What mark did you receive?
Ex: Essay	15%	39/50

4. Reason for Deferral

	Medical	Compassionate	Other:		
Did you previously defer this exam?				Yes	No
Did you attend and attempt to write this exam?				Yes	No
Do you write exams through Student Accessibility Services?				Yes	No

[\(Click for description of valid reasons\)](#)

5. Written Statement

Write a brief summary of your request. Include relevant dates, course codes, and factors impacting your final exam :

6. Previous Deferred Exams

If you submit a [Self-Declaration Form for Brief and Temporary Absence](#), future requests may require detailed medical or compassionate documentation. Have you previously deferred final exams? Yes No

If yes, list course(s) and reason(s) for deferral(s).

Term	Course	Reason

7. Acknowledgment of Responsibilities

Please review the information below. For questions about deferred exam responsibilities, contact an Academic Advisor in the First Year Centre.

I understand that course content or exam formats may change before the deferred exam and that I am responsible for all such changes.

I understand that I may be deregistered from future courses that require this course as a prerequisite if I do not achieve the required minimum grade.

I understand that it is my responsibility to ensure that the grade from a deferred exam meets application deadlines for any programs to which I have applied.

I understand that I must be available at the scheduled date and time of the deferred exam, and that I cannot negotiate this schedule.

I understand that a deferred exam may be denied if it is not mathematically possible for me to pass the course.

Notice Regarding Collection, Use, and Disclosure of Personal Information and Personal Health Information by the University

Your personal information and personal health information is being collected under the authority of The University of Manitoba Act. The information you provide will be used by the University for the purpose of determining your eligibility for deferred exam(s), coordinating your deferred exam with a department, SAS or off-campus invigilator (if applicable) and for communication. Your personal information and personal health information will not be used or disclosed for other purposes, unless permitted by The Personal Health Information Act (PHIA) or The Freedom of Information and Protection of Privacy Act (FIPPA). If you have any questions about the collection of your personal information or personal health information, contact the Access & Privacy Office (tel. 204-474-9462), 233 Elizabeth Dafoe Library, University of Manitoba, Winnipeg, MB, R3T 2N2.