

SOUTHEASTERN UNIVERSITY
OFFICE OF ACADEMIC SUCCESS
ADA ACCOMMODATIONS FOR EXAM

Professor: _____ Extension: _____

Class: _____

Today's Date: _____ **Date for exam to be completed:** _____

For Student (Name, ID#): _____

More than one student taking exam? Y or N

Number of exams given to Office of Academic Success: ____

List students taking exam (or attach a list):

1. _____
2. _____
3. _____
4. _____
5. _____

Instructions for student taking exam:

- Student will need to take the exam on the date indicated above. Any alteration of date or time will need to have instructor's written approval.
- ***You will receive a phone call from the Office of Academic Success indicating that your exam(s) have been completed. Please promptly retrieve these exams.***

Southeastern University
Office of Academic Success
863-667-5157

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