REQUEST FOR REAPPRAISAL OF A
FINAL EXAMINATION

TO BE COMPLETED BY THE STUDENT PRIOR TO THE INITIATION OF THE FORMAL
REAPPRAISAL PROCEDURE

Note: Students must consult with the course instructor prior to submitting this request. The request must be received by the Associate Dean (Undergraduate Programs) by the deadlines stipulated in the UAlberta Calendar “University Regulations and Information for Students, Examinations, Notification of Results, Reappraisals”.

Name: ___________________________ Student ID#: _________ UAlberta Email: ___________________________

Address: ___________________________

City: ___________________________ Province: ___________________________ Postal Code: ________

Phone: ___________________________ Phone (alternate): ___________________________

Course: ___________________________ Term: ___________________________

1. I am aware that the mark given on the reappraisal of the examination will replace the original mark.  

2. I understand that the reappraisal fee will be refunded to me should my appeal be successful. If my appeal is not successful, the reappraisal fee will not be refunded to me.  

3. I understand that the reappraisal fee must be paid through Financial Services within fourteen days of my application.  

4. I understand that the reappraisal process applies only to final exams (i.e. not applicable to papers).  

5. I understand that I cannot appeal the result of a reappraisal (i.e. the result is final).

Dated: ___________________________ Signature: ___________________________

Student
REQUEST FOR REAPPRAISAL OF A FINAL EXAMINATION

To be completed by the Associate Dean (Undergraduate Programs)

<table>
<thead>
<tr>
<th></th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>I have received a clean copy of the final examination for reappraisal (if applicable).</td>
<td></td>
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<tr>
<td>2.</td>
<td>I have received the original marked copy of the final examination.</td>
<td></td>
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<tr>
<td>2.</td>
<td>The reappraisal will be completed by:</td>
<td>Date:</td>
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<tr>
<td>3.</td>
<td>The time period for the reappraisal will be:</td>
<td></td>
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<td>4.</td>
<td>Result of the reappraisal is:</td>
<td></td>
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<td>5.</td>
<td>Student notified:</td>
<td>YES</td>
</tr>
<tr>
<td>6.</td>
<td>Faculty member notified:</td>
<td>YES</td>
</tr>
</tbody>
</table>

Dated: ___________________________ Signature: ___________________________

Associate Dean (Undergraduate Programs)

Printed Name: ___________________________

Protection of Privacy – The personal information requested on this form is collected under the authority of Section 33 (c) of the Alberta Freedom of Information and Protection of Privacy Act and will be protected under Part 2 of that Act. It will be used for the purpose of program administration by the Faculty of Kinesiology, Sport, and Recreation. Direct any questions about this collection to: UAlberta, Faculty of Kinesiology, Sport, and Recreation, FOIP Advisor, 3-107 University Hall, Van Vliet Complex, Edmonton, AB 780-492-0720