



Maalot Institutes of Torah
6530 N. 7th St. Phoenix, Arizona 85014
(480) 454-7228 maalotcollege.org

Request to Reschedule Exam

Name of Student _____ Date _____

Name & Number of course _____

End date of the course _____

Instructor _____

Name of Exam _____

Original Exam Date: _____

Reason for request to reschedule the exam or extend the due date of the paper:

New Date Requested for Exam _____

Signature of Student making the request _____

For your benefit, please make every effort to reschedule the exam as close as possible to the original date. No request will be granted for more than past 6 months from the end date of the course. This date must include enough time to grade and enter the final grade. It is the responsibility of the student to check that the final grade is entered before the 6 months have passed. Once six months have passed and no grade is entered, the student will receive an automatic F for the course.

Please return this form to: Maalotinfo@maalotinstitutesoftorah.com

For office use only

Request Permitted _____

Request Denied _____

Extended deadline (exact date) _____

Signature of Instructor _____

Signature of Dean or Director _____