

Student is responsible for taking these forms to each instructor.

CLARENDON COLLEGE

Permission to take Final Exams Early

Student Name: _____

Semester: ☐ Fall ☐ Spring ☐ Summer Year: _____

Reason for needing to take your final(s) early: _____

Course: _____ Approved ☐ Denied ☐

Date & Time of Scheduled Final: _____

*Date & Time of Early Final: _____

Instructor Signature: _____

***Please note failure to show up at the designated date and time for the Early Final will result in a “Zero” for the final exam grade.**

Student signature _____

Fill this portion out and give to student. Instructor keeps top portion.

Course: _____ Instructor _____

Date and Time of Early Final _____