

**Faculty of Physical Education and Health  
University of Toronto**

**Missed Examination Report  
(Mid-term or Final Exam)**

**Notes:**

- 1) **Form must be completed by administrative personnel or by student if student is present.**
- 2) **DOCUMENTATION MUST BE SUBMITTED TO SUPPORT REQUEST FOR MAKE-UP EXAM.** (e.g.: if you missed an exam because of an illness, the *University of Toronto Medical Certificate* will be required).
- 3) Students who missed a mid-term or final examination for an unforeseen and petitionable reason must notify the FPEH Registrar's Office within 24 hours of the scheduled examination. Failure to do so within the allotted time will result in the assignment of zero for the missed examination. For more details, see EXAMINATION PROCEDURES in your Calendar.

Student's Name: \_\_\_\_\_ Student #: \_\_\_\_\_

Phone #: \_\_\_\_\_ E-mail: \_\_\_\_\_

Details of student contact:  by telephone     by email     in person

Date and time message was received in the Office: \_\_\_\_\_  
Received by: \_\_\_\_\_

Exams missed/to be missed:

Date(s) of Exam	Courses	Professor(s)	What alternate arrangements have been made?
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Reason(s) for missed exam(s):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Additional Comments:

\_\_\_\_\_  
\_\_\_\_\_

**Notice of Collection - Freedom of Information and Protection of Privacy Act**

The University of Toronto respects your privacy. The information on this form is collected pursuant to section 2(14) of the University of Toronto Act, 1971. It is collected for the purpose of keeping track of missed examinations by the Faculty of Physical Education and Health. At all times it will be protected in accordance with the *Freedom of Information and Protection of Privacy Act*. If you have questions, please refer to [www.utoronto.ca/privacy](http://www.utoronto.ca/privacy) or contact the University's Freedom of Information and Protection of Privacy Office at 416 946-5385, Room 201, McMurrich Bldg., 12 Queen's Park Crescent, Toronto, ON, M5S 1A1

*For office use only:*

Documentation attached     Professor(s) notified     Copy in file

Result/Action \_\_\_\_\_  
\_\_\_\_\_

Missed Exam Report Completed by: \_\_\_\_\_ Date: \_\_\_\_\_