

FORM 103

Ohio Northern University College of Law Examination Accommodations Renewal

Name: _____ E-mail: _____

Local Address: _____

Local Phone: _____

Semester when accommodations were initially approved:

FALL SPRING 20____

Semester for which examination accommodations are being renewed:

FALL SPRING 20____

Accommodations to be renewed: (attach additional description if necessary)

1. _____

2. _____

Name of each course, date, time of exam:

Course Name	Date of Exam	Time of Exam
1.		
2.		
3.		
4.		
5.		

This form must be submitted to the Dean's Office by the end of the fifth week of the semester for which the accommodations are being requested. It must be accompanied by a current signed Authorization Form (Form 104).