



Examination Re-Read Request Form

Today's Date: _____

Date Student Received Graded Final Examination: _____

Course Requesting Re-Read of Final Examination: _____

Professor of Course: _____

Date of Final Examination: _____

Explanation / Reason for Request to have a Final Examination Re-Read:

Explanation may be included on additional pages as an Attachment as desired.

Documentary Evidence (suggested) may be attached.

Student Signature

Date

Print & Email (as pdf attachment) this Form and Any Supplemental Materials you believe necessary to support your Request to:

DeansOffice@AristotleLaw.com