

**APPLICATION FOR SPECIAL EXAMINATION  
FOR CREDIT OR GRADE**

*Office Use Only (Student Last Name)*

*Office Use Only (File#)*

*Term*


Administration Building, Room 210  
PO BOX 210066  
Tucson, AZ 85721-0066  
Phone: 520-621-3113 · Fax: 520-621-8944

THE UNIVERSITY OF  
**ARIZONA**<sup>®</sup>

TUCSON ARIZONA

**OFFICE OF CURRICULUM & REGISTRATION**

Website: <http://registrar.arizona.edu>  
E-mail: [reghelp@email.arizona.edu](mailto:reghelp@email.arizona.edu)

<b>Step 1 Fill Out Form</b>				
	<i>Last Name</i>	<i>First Name</i>	<i>Middle Name</i>	
	<i>Student Identification Number</i>	<i>Official UA Email Address</i>		
	Type of Grade Requested for Examination (choose one): <input type="radio"/> <b>Credit</b> <input type="radio"/> <b>OR</b> <input type="radio"/> <b>Grade &amp; Credit</b> <input type="radio"/>			Date of Special Examination: _____
	<i>Course Prefix &amp; Course Number (for example: MATH-100)</i>	Units	<i>Course Title</i>	
<b>Step 2 Obtain Required Signatures</b>	<i>Advisor</i>		<i>Date</i>	
	<i>Instructor of Examination</i>		<i>Date</i>	
	<i>Examining Department Head</i>		<i>Date</i>	
<b>Step 3 Pay Fees &amp; Obtain Bursar's Stamp</b>	— Bursar Will Not Stamp Without Signatures —		<b>Step 4 Turn Completed Form in at Exam</b>	
	Amount Paid \$ _____			
			Registrar Office Use Only	
			_____/_____ <i>Processed By / Date</i>	