



Application to Write a Supplemental Evaluation Measure

Student Name: _____ Student Number: _____

Program: _____ Course End Date: _____

Campus: _____

Course #: _____ Course Name: _____

Instructor: _____

Grade previously attained in course: _____

I am applying to write a supplemental evaluation for the course indicated above. To be eligible to write a supplemental evaluation I must have completed all assessment and evaluation measures for the duration of the course and have achieved a mark within ten marks of the passing grade.

I understand that, as per Policy 1114, I am permitted to write one supplemental evaluation measure per course to a maximum of two supplemental evaluation measures per term, and four per school year.

- The supplemental evaluation mark will replace the original posted mark as the course final grade up to a maximum of 60%.
- In cases where supplemental evaluation mark does not exceed the original mark achieved, the original course mark will prevail.

Student Signature

Date

Approved: ☐ Denied: ☐

Academic Chair Signature

Date