Université d'Ottawa | University of Ottawa

REQUEST FOR A DEFERRED MARK

STUDENT IDENTIFICATION

SURNAME	GIVEN NAMES	STUDENT NUMBER

EMAIL	ACADEMIC UNIT / DISCIPLINE	☐ DIPLOMA ☐ MASTER'S ☐ PH.D.

COURSE CODE	SECTION	COURSE TITLE	PROFESSOR'S NAME

TERM ☐ FALL ☐ WINTER ☐ SPRING - SUMMER YEAR

REASON FOR REQUEST

☐ DOCUMENTS ATTACHED

PROFESSOR

NOTE: THE DEADLINE FOR DEFERRAL CANNOT BE EXTENDED BEYOND ONE TERM.

☐ **DFR GRANTED**

DEADLINE

YEAR	MONTH	DAY

CONDITIONS

☐ **DFR REFUSED**

REASON OF REFUSAL