

**Request to sight examination script  
 UNDERGRADUATE UNITS ONLY**

**The closing date for applications is 4.00 pm on Friday, 24 July 2009**

*Applications will not be accepted for Units where a  
 DEFERRED EXAM has been approved*

**A SEPARATE FORM MUST BE COMPLETED FOR EACH UNIT**

ID Number: 

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Family Name: 

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Given Names: 

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I hereby request the unit leader to forward to the Department of Accounting and Finance administration office at Clayton campus the examination script for the following exam:

Unit Code: 

A	F	C				
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Unit Title: .....

**I declare that I will sight the examination script book in the presence of an authorised Faculty staff member, and that I will not photocopy, mark or alter the examination script in any way.**

Signed: ..... Date: .....

*Tear along this line and retain this for your records*

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- *Only students viewing their paper will be allowed entry to the viewing session.*
- *Do not bring a friend along.*
- ***No pens, pencils, mobile phones etc, etc** will be allowed during exam viewings.*
- *This is strictly a viewing session only*
- *Question sheets will not be available during the viewing session.*
- *Please take note of the date, time and location of viewing session as no further notification will be forwarded.*

**Your viewing will be held on Wednesday, 29 July 2009 between 2.00 pm and 6.00 pm – Bldg 11, H8.**

ID Number: 

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Family Name: 

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Given Names: 

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Unit Code: 

A	F	C				
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