



UNIVERSITY OF
ARKANSAS

DALE BUMPERS COLLEGE
OF AGRICULTURAL, FOOD & LIFE SCIENCES

Term

Requested Date

Description of Special Problems

Subject

Catalog Number

Section

Hours

Department

Instructor's Name

Instructor's ID

Session

UACONnect Number

Student's Name

College

Student's ID

Description of Special Problem: (include information regarding required student activities)

Received By:

Date:

Dean's Office Use Only

Processed By:

Date:

Method of Evaluation of Student Progress and Assignment of Grades: (include information regarding any quizzes, exams, reports or presentations required, how each will be graded, and how a final grade is calculated)

Student Signature

Date

Instructor Signature

Date

Department Head Signature

Date

Dean's Office Approval

Date

Please return this form to the Bumpers College Dean's Office (AFLS E-202) prior to the start of the requested term.