

## Assignment Remarking Request Form

Family Name: \_\_\_\_\_ Given Name: \_\_\_\_\_

Student Number: \_\_\_\_\_ Assignment #: \_\_\_\_\_

Date: \_\_\_\_\_

In the space below, briefly explain why your submission should be re-marked.

I understand that, by submitting this request for re-marking, any part of my original submission may be re-marked and my mark may increase or *decrease* as a result. I also understand that the assignment will be remarked by the instructor, and that the outcome of processing this remarking request will be final and no additional remarking requests on this particular assignment will be accepted.

Signature: \_\_\_\_\_

Submit this form to your instructor in person after a lecture or during the instructor's weekly office hours, within **two weeks** of the release of the grades. You may staple this form with additional evidence as you prefer. If you are unable to attend a lecture or an office hour, ask another student in class to submit the form on your behalf. Email submissions are not accepted. Do not write below this line.

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Instructor's recommendation