

澳門大學

UNIVERSIDADE DE MACAU UNIVERSITY OF MACAU

Faculty of Science and Technology Re-sit /Supplementary Examination Application Form

	Academic Year	/	$\underline{}$ $\underline{}$ $1^{st}/\underline{}$ 2^{nd} Semest	er	
Student Name : Academic Unit: Year of Study :			Student Number : Major: Contact Number:		-
I would like to ap	ply for Re-sit Exa	amination(s)	for the following cour		
Course,/ Class Code		Course Title		<u>Qualified</u> <u>Y / N</u>	
				()
				()
				()
re-sit exami 2. Any 4 th year examination 3. No special c	nation; · student can be a · but with 40% of	llowed to tal marks and criteria no. 1	e is allowed to take or ke one more (total 3 co above; and 2 will be entertai	ourses) re	e-sit
Student Signature:			Date:		
	F	or Office Us	e Only		
Input by:			pecked by:		
Date:	· 	$\left \frac{1}{Da} \right $	ıle:		

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