Due to the restrictions on activities during Pre-Finals Week (a.k.a. “Dead Week”), classroom reservations during this period must be reviewed for compliance with the University’s Pre-Finals Week policy (see box below).

Email, mail or deliver completed form, with all required signatures, to:
Office of the Registrar
Course Management
322 Student Union
Email: gurooms@okstate.edu

* Course Management will email confirmation

Oklahoma State University Pre-Finals Week Policy

1.01 Any final examinations to be rescheduled must have written approval from the Vice Provost’s Office located in 101 Whitehurst.

1.02 Final examinations are scheduled at the end of each semester and are preceded by pre-finals week, which shall begin seven (7) days prior to the first day of finals.

1.03 During pre-finals week, all normal class activities will continue; however, no assignment, test, or examination accounting for more than 5 percent of the course grade may be given; and no activity or field trip may be scheduled that conflicts with another class. This excludes make-up and laboratory examinations, out-of-class assignments (or projects) made prior to pre-finals week, and independent study courses.

1.04 During pre-finals week, no student or campus organizations may hold meetings, banquets, receptions, or may sponsor or participate in any activity, program, or related function which requires student participation.

### CLASSROOM REQUEST

<table>
<thead>
<tr>
<th>Requested Date(s):</th>
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<tbody>
<tr>
<td>Requested Time(s):</td>
<td></td>
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<tr>
<td>Preferred Room:</td>
<td></td>
</tr>
<tr>
<td>Purpose/Activity (include course number):</td>
<td></td>
</tr>
</tbody>
</table>

Name (please print): ___________________________ Banner ID: ___________ Phone: ___________________________

Department: ___________________________

Email Address: ___________________________

Signature/Printed Name: ___________________________ Date: ________________

Department Head Signature/Printed Name: ___________________________ Date: ________________

Associate Dean for Instruction
Signature/Printed Name: ___________________________ Date: ________________

Associate Provost approval delegated to College Associate Deans for Instruction by Academic Affairs and Instruction Council 10/4/2013.

Registrar's Use Only

Processed By: ___________________________ Date: ________________

Revised: 11/2019