PETITION FOR WAIVER OF GRADUATE PROGRAM REGULATIONS

Name:_____ Date:_____

Student ID: _____ Telephone:_____

Email:_____ Graduate Program/Major: _____

Waiver Request Options:

☐ Substitution of Required Core Course

☐ Request Graduate Credit for Courses Taken During Undergraduate Career

☐ Late Application for Graduation

☐ Other Petitions Regarding other Graduate Studies/Program Policies

NOTE: STUDENTS ARE REQUIRED TO SUBMIT A SUPPORT LETTER AND AN UNOFFICAL TRANSCRIPT ATTACHED TO THIS PETITION.

Purpose of Petition and Rationale or Justification for this Request as Follows:

Bonord Sinjovy

Student's Signature   **Date**

Chair, Program Director or Graduate Coordinator, please indicate if you ☐ **support** ☐ **do not support this petition**

Signature of Chair, Director or Coordinator   **Date**
(not required for unclassified students)

Name of Chair, Director or Coordinator (print or type)   **Extension**   **E-mail**

STUDENT-DO NOT WRITE BELOW THIS LINE

Review and Action: ☐ Approved   ☐ Not Approved

Signature: Dean or Appointed Designee, Graduate Division   **Date**