



## **Waiver of Graduate Program Regulations**

### **Instructions for Completing Waiver of Graduate Program Regulations**

Form must be typed.

The petition for Waiver of Graduate Program Regulations may require supporting documentation. Please contact your graduate advisor or department chair for assistance in completing this form. Incomplete petitions will be returned to the student until all supporting documentation can be provided. Please allow 4-6 weeks for processing.

NOTE: This petition cannot be used for Graduate Admissions purposes.

**Form begins on Page 2**

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**PLEASE NOTE:** in order save your personal information on the following PDF forms, you will need to:

1. Install latest version of Adobe Acrobat Reader on your computer. Click here for Free Adobe Acrobat Reader <http://www.adobe.com/products/acrobat/readstep2.html>.
2. Save the PDF form to your computer desktop prior to entering your personal information.

# PETITION FOR WAIVER OF GRADUATE PROGRAM REGULATIONS

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Address: \_\_\_\_\_ Student ID: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_ 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.**

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

\_\_\_\_\_  
**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**

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Review and Action:  Approved  Not Approved

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