The top portion of this form is to be completed by the student, and then taken to the appropriate individuals for recommendations, comments, and signatures. If any or all individuals recommend disapproval, this request will continue to the Dean or designee of the Graduate College for a final

All Information Must Be Typed

Signature Date

_____

Attach a letter outlining the details of your request. The letter must include the requirement you wish to have waived, the precise action to be taken, and the justification or reason for the request. In explaining the request, you may choose to describe the circumstances that led to this situation, explain why a requirement waiver is the best remedy, and state specific ways an approval would solve the problem.

Comments (Attach a letter if necessary):

I recommend the following action:

☐ Approval   ☐ Disapproval

_____   _____
Student's Advisor or Program Coordinator (Signature)   Date   Student's Advisor or Program Coordinator Email

Comments (Attach a letter if n

I recommend the

☐   ☐

ecessary):

☐   ☐

_____
College Dean or Designee (Signature)   Date

I recommend the following action: Comments (Attach a letter if necessary):

☐ Approval   ☐ Disapproval

_____
Dean of the Graduate College or Designee (Signature)   Date