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Name of student: \_\_\_\_\_ T#: \_\_\_\_\_ Date: \_\_\_\_\_  
(Last) (First) (MI)

Phone: \_\_\_\_\_ Email: \_\_\_\_\_ Major: \_\_\_\_\_

Course Information: \_\_\_\_\_  
*.\*Indicates required field!* \*Subject \*Course No. \*Section No. \*CRN

The University requirement from which you are seeking an exemption (Please cite from the undergraduate or graduate catalog):

Explain in detail why you cannot reasonably meet the requirement and what action you would like the committee to approve (continue on back, if necessary):

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**Recommendation of Chairperson (of a student's major or department in which exception is being requested)**

Approve \_\_\_\_\_ Deny \_\_\_\_\_ No recommendation \_\_\_\_\_ Date \_\_\_\_\_

Comments \_\_\_\_\_

Signature \_\_\_\_\_

**Recommendation of Dean, College, or School**

Approve \_\_\_\_\_ Deny \_\_\_\_\_ No recommendation \_\_\_\_\_ Date \_\_\_\_\_

Comments \_\_\_\_\_

Signature \_\_\_\_\_

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**RECORDS OFFICE USE ONLY:**

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**Action taken by Committee**

Votes for \_\_\_\_\_ Votes against \_\_\_\_\_ Abstentions \_\_\_\_\_ Approve \_\_\_\_\_ Deny \_\_\_\_\_ Date: \_\_\_\_\_

Comments \_\_\_\_\_

Signature \_\_\_\_\_