

REQUEST FOR EXCEPTION TO REGULATION

Name		
Date		MaineStreet ID (7 Digits)
Address		
Department of Study		
Note:	This request is to be initiated by the student, and signed and forwarded to The Graduate School by the Advisory Committee along with their recommendation.	
CITE POLICY FROM GRADUATE CATALOG:		
REQUEST:		
JUSTIFICATION:		
		I hereby certify that the information given is correct to the best of my knowledge
		(Student Signature)
	(use add	(student Signature) ditional sheet if necessary)
Recommendation of Advisory Committee		
Chair		Member
_		Member

ACTION BY GRADUATE EXECUTIVE COMMITTEE		
	ApprovedDenied	Tabled Subject To
Gradua	ate School Approval	Date