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**II. TO BE COMPLETED BY PROGRAM:**

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**Approved**

**Modified**

**Not Approved**

Each request for an exception must include a written response by the program representative and faculty/staff committee, instructor, or advisor as appropriate, responding to each issue raised by the student and stating the rationale for the program's recommendation. How does this response fulfill the spirit of the rule?

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Supporting Signature (Advisor or Instructor as appropriate)

Date

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Graduate Program Representative Signature (Required)

Date

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**III. GRADUATE SCHOOL DECISION**

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**Approved**

**Modified**

**Not Approved**

**No Action – Resubmit request based on remarks. This is NOT an approved request.**

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**REMARKS:**

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Graduate School Signature

Date

**Transcript Entry**

**Forms Processed**

Initial/Date: \_\_\_\_\_