



Request for Exemption from the Final Examination

(Submit to the Office of Graduate Studies at least 10 working days prior to the deadline to schedule the final exam)

Permission is requested to exempt the final examination for (Name) _____
(UIN# _____) for the degree of _____

All committee members have been consulted and have agreed to the exemption:

The student's academic records have been reviewed,
and he/she is qualified to be exempt from the final exam.

Approved Chair or Co-Chair

Approved Co-Chair

Committee Member

Committee Member

Committee Member

Committee Member

Committee Member

Approved Department Head OR
Intercollegiate Faculty Chair

Approved Office of Graduate Studies

Office of Graduate Studies Use Only

applied/should apply for _____ graduation _____ Course work completed _____

_____ ELPE

Lacks: _____

_____ Residency requirement

_____ Overall GPR

Incompletes: _____

_____ Degree plan GPR

_____ Registered

_____ Proposal

_____ Exam Approved

_____ d/p: 90 day rule

_____ Oral forms mailed _____

xc: Thesis Office