



**TEXAS A&M UNIVERSITY
OFFICE OF GRADUATE STUDIES
PETITION FOR WAIVERS OR EXCEPTIONS**

(submit original and three copies)
(Do not use this form to request time limit extensions.)

Date

A. Describe in this section clearly and concisely the exception or waiver you are requesting:

B. Exceptions to published rules that are granted by Texas A&M University are subject to periodic review and audit by the Texas Higher Education Coordinating Board and the Southern Association of Colleges and Schools. For your petition to receive careful consideration, please present justification for your request. Include factors necessitating the request that were beyond your control, ways in which the exception will benefit your study, and/or ways in which you believe you have met the spirit of the requirement.

(If committee formed in current program):

Approval Recommended:

Committee Information

Student Information

Chair: _____ Dept.

_____ Student's UIN

Member: _____ Dept.

_____ Student's Name

Member: _____ Dept.

_____ Student's Signature

Member: _____ Dept.

_____ E-mail

Member: _____ Dept.

_____ Mailing Address

Member: _____ Dept.

_____ Date of Approval

Department Head **OR**
Intercollegiate Faculty Chair:

For Office of Graduate Studies