

UNIVERSITY OF MARYLAND, COLLEGE PARK The Graduate School



PETITION FOR WAIVER OF REGULATION

		Date:	
Distribution of the second of		Student University ID Number (UID)	
Print Full Name (Last, First, Middle)			
 		Graduate Program	Initial Term (GEMS use only)
Address			
City, State, ZIP		Degree Sought:	
City, State, ZIP			
(Area Code) Telephone		Email Address	
(Alea Code) Telephone			
Student's Signature			
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Please provide the information requested hele	w and type or pri	int logibly your request fo	or waiver or modification of
Please provide the information requested belopolicy. Explain your petition on the reverse side			
copy of this petition. The Graduate School will			
student provides above.		no decicion to the progra	
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Please choose petition type:			
		<u>-</u>	Adv. Spec. Students Only
Deadline for Diploma Application		or Committee Form	☐ Add Course
Deadline for Approved Program Form		ance to Candidacy	☐ Drop Course
□ Deadline for Certification of Completion		or Dissertation/Thesis	☐ Waiver of Late
☐ Waiver of Mandatory Fees	□ Waiver of 0	Continuous Registration	Registration Fee
Other (please explain)			
la structur (Drint Norse than Circa) Adv. Cross Ctudents	- Only Data	Talanhana automaian and	L Carall Address
Instructor (Print Name then Sign) Adv. Spec. Students	s Only Date	Telephone extension and	Email Address
Advisor (Print Name then Sign)	Date	Telephone extension and	Email Address
Advisor (Print Name then Sign) Date		relephone extension and	Linaii Addiess
Director of Graduate Program (Print Name then Sign)	Date	Telephone extension and	Email Address
		☐ Granted ☐ □	Denied
Graduate School Representative	Date		
Please return this form to:			

The Graduate School
2123 Lee Building • University of Maryland
College Park, Maryland 20742-5121
301.405.0376 Voice • 301.314.9305 FAX
gradschool@umd.edu