

Petition for Modification or Waiver of Regulation or for Extension of Deadline

Student: _____ UMID: _____

Student's E-mail: _____ Admit term: _____

EER Faculty Advisor: _____ Degree level (MS or PhD): _____

Student signature: _____ Date: _____

1. Provide an explanation of your request below. If requesting a time extension, include why the deadline cannot be met as scheduled, what work remains and by what date (month/year) it can be completed.
2. Obtain the signature of your faculty advisor. If this request will change your initial Plan of Study, you must complete an updated Plan of Study, have it signed by your advisor and submit with this form to your graduate coordinator.

EER Faculty Advisor's support

I support this petition/request I do not support this petition/request

Signature of EER Faculty Advisor: _____ Date: _____

EER program decision:

This petition/request is approved This petition/request is not approved

Signature of EER Graduate Chair: _____ Date: _____