

Exception/Waiver Form

Graduate Students

Please submit this form electronically. Fill it in and save to your computer, then attach to an email to the Graduate Student Graduation Team:
graduate.records@umb.edu.

Student Name: _____ ID#: _____

Print Name and Department: _____

Authorized Departmental Signature: _____ Date: _____

EXCEPTION

Courses listed in this section will be treated as exceptions and will apply solely to the record of the student listed on the form. Please submit to the Graduation Team for processing.

Use this course

e.g. COUNSL 601

In place of this course or requirement

e.g. SPY G 605 / e.g. Internship

WAIVER

Courses listed in this section will be waived, meaning the student is exempt from taking the course or fulfilling the requirement. The credit minimum for your major is NOT waived.

Waive this course/requirement (credits must be made up with electives)

e.g. COUNSL 601 / e.g. Practicum

