



Master of Public Service and Administration Petition for Waiver or Substitution of Program Requirements

1. Name: _____ 2. UIN: _____ 3. Anticipated Graduation Date _____

4. Track: _____ 5. Concentration: _____

6. Select one of the following (use back of form if additional space is needed):

a. Request to take more than six credit hours outside the Bush School

Requested course number and name _____

Reason for request _____

b. Request to count course toward track or concentration requirement (please specify)

Requested course number and name _____

Reason for request _____

c. Other: Reason for request _____

Student's Signature

Date

Approved

Disapproved

Advisor's Signature _____

Date _____

Approved

Disapproved

Department Head Signature _____

Date _____