

REQUEST TO WAIVE DISSERTATION OR THESIS REGISTRATION

Graduate students should use this form to request a waiver of the registration requirement for dissertation/thesis research in accordance with graduate policy quoted below. Students should review the complete policy to avoid delays in graduating.

Graduate Policy states: "Subsequent to the initial registration, the [thesis] student must continue to register for at least three hours of thesis each academic term, including summer, until the thesis is defended and accepted ... A doctoral student who has been admitted to candidacy must normally register each academic term thereafter for three or more credit hours of dissertation thro \tilde{A} O f ce of Graduate Programs

STUDENT NAME	STUDENT I.D. NO.
Last	First
DEPARTMENT	EXPECTED GRADUATION TERM
DEGREE LEVEL	MAJORPh.D., Psy.D., etc.)
(IVI.S., IVI.Ed., F	11.D., FSy.D., etc.)
WAIVER REQUESTED FOR	Date/Term FINAL PROGRAM/COMPREHENSIVE EXAMINATION SCHEDULED Date/Term
	Date/Term Date/Term
I acknowledge t	nitting this form, I am verifying that I will not use university facilities or faculty time during the indicated term hat I am responsible for meeting all deadlines associated with completing and submitting my dissertation nd to avoid paying an additional examination fee, I must be of cially registered for the term during which my final program or comprehensive examination is scheduled.
STUDENT SIGNATURE	DATE
Rfgq u_gtcp ugjj mljv dmpu_i	v`c npmacqqcb ugrf rfc pcosgpcb qgel_rspcq `cjmu, Qrsbclrq qfmsjb фjj msr_lb qgel rfgq dmp k `cdmpc bbgle rm rfc bcn_prkclrdmp qgelgle _lb qs`kgqqgml rm rfc Мцас md Ep_bs_rc Npmep_kq
MAJOR ADVISER	DATE
DEPARTMENT HEAD	DATE
DIRECTOR, GRADUATE PROGRAMS	<u>D</u> ATE
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