REQUEST FOR EXCEPTION FOR HEAD GRADUATE ADVISOR APPROVAL

This form is to be completed by the Hiring Unit and retained in the student's file of their academic department. Should the Hiring unit be outside the student's academic department, it is recommended that the Hiring Unit also retain a copy for its records. *Please do not submit this form to Graduate Division.* An approval signature by the student's Head Graduate Advisor is required for the Request for Exception to be valid.

	Last Name	Fi	irst		Middle		SID	_
	Student's Acaden	nic Program: _						
	Period of Excepti		Spring 20		Other: _			
	Appointment Typ		☐ _{Tutor}	[∄] _{GSR}	đ	Staff/Other:		
	Name of Hiring U	nit:						
	Contact's Name of Hiring Unit (Please Print)					Email (Please Print)		
	Hiring Unit Signa	ring Unit Signature Authorization				Date		
	As	s student's Hea	ad Graduate Advis	or, I concur	with th	his Request	for Exception.	
	Student's Head Graduate Advisor's Signature					 Date		
1.	doctoral candid	асу				•	student is <u>not</u> ac	dvance
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	3. GSI appointment for 9 th or 10 th semester							
	Advanced to Candidacy?							
	Number of GSI semesters prior to this appointment:							
	% time of GSI appointment:							
Ø	Student is in good academic standing; appointment will not affect progress towards degree							
Ø	Department has critical need; student is uniquely qualified							
	Other reasons (write below or please attach additional comments):							