

INDIANA STATE UNIVERSITY

Admission Checklist Waiver

NOTE: This form will only be used to request waivers based on the current graduate admission criteria within a specific graduate program. Requests made must be from the Graduate Program Director.

Name: _____ Student ID# _____

Last First M.I

Program/ Degree _____

Effective Term _____

Effective Year _____

Table with 2 columns: Admission Requirement Request to be Waived, Reasoning

Required Approvals

Program Director Printed name Signature Date

CGPS Dean Printed name Signature Date

Email to the College of Graduate and Professional Studies, ISU-GradInfo@indstate.edu. Forms will only be accepted when emailed from the department or college.

Copy to be retained in ImageNow.