Date Received by the Graduate School:

## Graduate 6 W X G H Q W ) 7(QUROOPHQW ([FHSWLRQTh 5 thite Ksity & Mkron ZLWK IX OV OW DWL R M Graduate School

For use by graduate students seeking to be considered a full-time student with less than 9 graduate credit hours. Fill out one section only .

It is unlikely that an exception will be granted for more than one semester for students in their final semester.

## Doctoral Student in final Semester ONLY

EmplID#:	UA E-Mail:	Date:			
First Name:	MI:	Last Name:			
Street Address:					
City:		State:	State: Zip:		
International Student	Domestic Student	In-State	Out-of-S	Out-of-State	
Academic Department:					
	tudent in my final semester of study	and have complet <b>ele</b> galee re	_ Anticipated Graduat L RTerm equirements except the dissertation LWDWLRQ mandated internshi		
:MPL ID#: UA E-Mail:					
First Name:	MI:	Last Name:			
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City:		State:	Zip:		
International Student	Domestic Student	In-State	Out-of-	State	
Academic Department					
Master's Student	Doctoral Student	SCH Required for Degre	ee:SCH \$FFXPXC	SCH \$FFXPXODWHG:	

Semester for which CPT \$7 \$0, is