4.2 Waive technical writing requirement

Last name:	First name:	SID:	
Email: Phone:			
Program: □ MSCMPE □	JMSSE		
(1) Student submits			
* •	±		
(2) Department office			
Tracking Number:	Time Stamp: _		
☐ Ask the student to m	nake an appointment with Pr	rogram Director	
(3) Program Director			
Decision:		Initial: Date	::
(4) Student			
☐ Picks up the package ☐ Delivers package to	e Time Stamp: _ AVP Graduate Studies and	Research	
(5) AVP Graduate Studie	es and Research		

☐ Notifies student about the decision