



DEGREE EXCEPTION REQUEST FORM

Name _____ SID _____ - _____ - _____

Address _____
(Number & Street) (City, State, Zip code)

Daytime phone _____ Evening phone _____

Degree Program _____

Quarter/Year you anticipate graduating _____

Student signature _____ Date _____

INSTRUCTIONS TO STUDENT

1. Complete the Degree Exception Committee Request form.
2. Write a statement describing your degree exception request. Be specific in your request.
3. Provide a letter of support from the appropriate department/division. *Requests that do not include a letter of support from the appropriate department/division will not be considered and will be returned to the student.*
4. Submit your request and all documents to the Evaluations Office at the Fort Steilacoom campus.

The Degree Exception Committee will convene on an as-needed basis. Students will be notified of the Committee's decision.

Committee Action Taken

Approved _____ Denied _____

Registrar's Signature _____ Date _____

Comments _____

