Request to Waive GRE

For all Ph.D. programs
School of Engineering and Computer Science

Oakland University Graduate Admissions 520 O'Dowd Hall Rochester, MI 48309-4475 gradinfo@oakland.edu

First	Name:	Last Name:		
Addr	ess:			
Email:		Daytime Phone:		
Adm	issions term:			
instit GRE subm	tution not accredited by a requirement if at least or	cores from the Graduate Record Examination (GRE) if they graduated from an gional accrediting agency of the USA. The department may choose to waive the following special circumstances is met. To request a waiver, applicant realished as part of the application packet. The request for waiver is subject missions Committee.	he nust	
Pleas	se check the appropriate	sponse:		
	Applicant's last degre	from a U.S. institution accredited by a regional accrediting agency.		
	Name of institution			
	Degree earned	Overall GPA Year earned		
	Applicant's overall GP	rom last degree is at least 3.5 on a 4.0 scale.		
	Name of institution			
	Degree earned	Overall GPA Year earned		
	• •	the USA for at least two years in the engineering profession (please attached npany to verify employment).		
	Name of company			
	Company address			
	Job title			
Appli		Date:		
To be	e completed by Ph.D. pro	am Coordinator (when reviewing final application file):		
	Approved	☐ Denied		
Comi	ments :			
Nam	e (print or type):			
Signa	ature.	Date:		