Date Received by the Graduate School:

## Graduate Student Request to be considered Full-Time with less than nine credit hours



For use by graduate students seeking to be considered a full-time student with less than 9 graduate credit hours. It is unlikely that an exception will be granted for more than one semester for students in their final semester.

EMPL ID#:	UA E-Mail:		Date:	
First Name:	MI:	Last Name:		
Street Address:				
City:		State:	Zip:	
International Student	☐ Domestic Student → >	In-State		
Academic Department:				
Master's Student	Doctoral Student	SCH Required for Degree:	SCH Accumulated:	
Reason for request:				
Check one.				
I am a doctoral student in	n my final semester of study and ha	ve completed all degree requiremen	ts except the dissertation,	•
or				•
thirty or more hours per	dent participating in curricular pract week with the approval from the Int complete this form for each semeste		raining (AT) opportunities of	
Semester for which CPT	is to be completed:			
				•
				:
				:
For Graduate School Use Only The exception is granted with the folk	owing contingencies or conditions.			
		Appointee		Date
		Chair/Director of Appointee's Academ	ic Department	Date
		Head of Service Department or Grant	Director	Date
		(if different from the Chair/Director of		_ 3.0
		Graduate School Approval		Date