Instructions for Graduate & Post Baccalaureate Student Special Requests

All Students

- Complete the top of the form and SPECIAL REQUEST JUSTIFICATION SECTION. Attach any necessary documentation that substantiates your request. You must provide evidence demonstrating extenuating circumstances that otherwise prevented you from following established rules and procedures.

Post-Baccalaureate Students

- Complete the Special Request justification section and attach any necessary documentation.
- Obtain necessary signatures:
  - Instructor, if it applies to course enrollment
  - Associate Dean of the College of Education, if preparing for teacher licensure
- Submit form to the Graduate School for final consideration by the Senior Associate Dean.

Degree Seeking Students

- Complete the Special Request justification section and attach any necessary documentation.
- Obtain necessary signatures:
  - Instructor, if it applies to course enrollment
  - Graduate coordinator, or program advisor
  - Department chair
- Submit form to the Graduate School for final consideration by the Senior Associate Dean.

Note Concerning Refunds

The Special Request form is used to request exceptions to graduate student academic policies for students with extenuating circumstances. The Special Request form may not be used to request tuition refunds. If a Special Request is approved and the student is interested in requesting a tuition refund, a separate Appeal for Tuition, Housing, and Dining form must be submitted to the Office of Student Accounts. Subsequent decisions about refunds are independent of this Special Request and are based on the Fee Payment and Appeal Policies.

See “Tuition Appeal Form” online at www.finance.uncc.edu/Tuition_and_Fees.htm.
# Graduate & Post-Baccalaureate Students

**SPECIAL REQUEST**

After endorsements have been obtained, present completed form to the Graduate School.

**Name:** ____________________________________________

(Please print) **Last**  **First**  **Middle Initial**

**Present Address:** ____________________________________  **City & State:** _________________________  **Zip:** ______________

**Phone:** ____________________________________________  **E-mail:** ________________________________________________

What course and term are involved, if any?  **COURSE #:** ___________  **SECTION #:** ___________  **TERM:** ___________

**STATE SPECIFIC REQUEST AND PROVIDE JUSTIFICATION:**

___________________________________________________________________________________________________________

___________________________________________________________________________________________________________

___________________________________________________________________________________________________________

___________________________________________________________________________________________________________

___________________________________________________________________________________________________________

_______________________________________________________

(Attach separate sheet, and documentation, if more room is needed)  **Student Signature**  **Date**

---

**ENDORSEMENTS:**

1. **INSTRUCTOR**

   Instructor comments: ____________________________________________

   □ Never Attended  □ Is/Was Passing  □ Is/Was Not Passing

   **Instructor Signature**  **Date**

2. **GRADUATE COORDINATOR or PROGRAM ADVISOR**

   Comments: ____________________________________________

   □ Recommended  □ Not Recommended

   **Coordinator or Advisor Signature**  **Date**  **Phone #**

3. **CHAIR OF DEPARTMENT**

   Comments: ____________________________________________

   □ Recommended  □ Not Recommended

   **Chair Signature**  **Date**

4. **IF YOU ARE PREPARING FOR TEACHER LICENSURE, YOU MUST CONSULT THE COLLEGE OF EDUCATION**

   Comments: ____________________________________________

   □ Recommended  □ Not Recommended

   **Associate Dean, College of Education**  **Date**

---

**FINAL CONSIDERATION:**

**SENIOR ASSOCIATE DEAN OF THE GRADUATE SCHOOL**

Comments/Action: ____________________________________________

□ Approved  □ Not Approved

**Senior Associate Dean Signature**  **Date**

---

Processed by: _____________________________  **Date:** ______________  **SPACMNT** ___________  **Other** ___________  

White-Graduate School; Yellow-Major Department; Pink-Student  

Rev 8/07