

**College of Engineering and Physical Sciences**  
**DEPARTMENTAL PETITION FOR PROGRAM VARIANCE**

From UNH Academic Policies, Section 05.31(fs), Waiver of requirements in a prescribed curriculum: “The requirement of a given course in any prescribed curriculum may be waived by the faculty of the student’s college. (This power will usually be delegated by the faculty to the dean or to a committee.) The student’s petition must be approved by his or her major adviser and the dean of his or her college.”

Procedure:

1. The student fills out the reverse side of this form and brings it to her or his advisor for comment, recommendation, and signature.
2. The petition is reviewed by the faculty in the department of the student’s major.
3. If denied by the department, the department notifies the student and the student’s advisor.
4. If approved by the department, the department completes the section below and forwards this form to the CEPS Office for Academic Affairs, W283 Kingsbury Hall, for final approval and inclusion in the student’s file.
5. The CEPS Office for Academic Affairs returns the original to the department.
6. The department notifies the student and the student’s advisor of the disposition of the request.

On behalf of this department, this petition for variance is:

Accepted          Denied

Department Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signatory’s printed name: \_\_\_\_\_

Signatory’s title: \_\_\_\_\_

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The CEPS Office of Academic Affairs has reviewed this petition and this petition is:

Accepted          Denied

As an acceptable variance to the department requirement or policy.

Dean or Associate Dean’s Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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Name: \_\_\_\_\_ ID Number: \_\_\_\_\_

Department: \_\_\_\_\_ Major: \_\_\_\_\_

Class: FR SO JR SR Other: \_\_\_\_\_ UNH E-mail Address: \_\_\_\_\_

Specifically, for what departmental requirement or policy do you want an exception?

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Justify your request for an exception to the Departmental requirement or policy.

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Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Advisor's comments:

Do you, the advisor, recommend approval of this petition? Yes No

Advisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Advisor's Name Printed: \_\_\_\_\_