**Request for Exceptions to Policy (REP) are used to request waivers from the H. Wayne Huizenga College of Business and Entrepreneurship under unusual circumstances. Students can officially request a waiver from a published academic policy by completing a REP. Before a REP is submitted, students should seek advice from their academic advisor in an effort to resolve their issue of concern and determine if an official REP is necessary.**

**Student Name:** **NSU ID:** **Date Submitted:**

**Major:       Campus Location:       Term:       \* one term per from**

**Email:       Phone:**

|  |  |
| --- | --- |
| Course Prefix/Number |  |
| CRN |  |
| Course Title |  |
| Check box if you are seeking an appeal for the course |  |
| Action Request | Choose an item. |

**COURSE FOR REVIEW: Please list ALL courses within the semester. Be sure to check box for courses you are appealing.**

|  |  |
| --- | --- |
| Course Prefix/Number |  |
| CRN |  |
| Course Title |  |
| Check box if you are seeking an appeal for the course |  |
| Action Request | Choose an item. |

|  |  |
| --- | --- |
| Course Prefix/Number |  |
| CRN |  |
| Course Title |  |
| Check box if you are seeking an appeal for the course |  |
| Action Request | Choose an item. |

|  |  |
| --- | --- |
| Course Prefix/Number |  |
| CRN |  |
| Course Title |  |
| Check box if you are seeking an appeal for the course |  |
| Action Request | Choose an item. |

**ACTION REQUESTED**: Provide an explanation of requested action. Include the page number referenced in the current student catalog for policy in question and provide other relevant information including specific courses, terms, and registration transactions.

**RATIONALE:** Detail exact reason(s) for request. Why should an exception to policy be made in this instance? Attach supporting documentation (see below). If you are registered for additional course(s) in an appeal term, please justify why you are not requesting an exception to the additional course(s).

**Documentation:**

Medical: Death: Miscellaneous:

Letter from physician indicating date  Death Certificate  Police Report Military Orders of onset or worsening of illness.  Obituary  Legal Documents  Airline Tickets

Admission and discharge paperwork  Other: please explain:

**PRIOR ACTION TAKEN:** Provide a list of all individuals contacted about the problem, including their departments.

Students should refer to the appropriate catalog sections for policies on registration periods, drop periods with refunds, and withdrawn from classes and contact the appropriate office (i.e. Financial Aid, Lenders for Student Loans, Bursar’s Office, Office of International Student Scholars, etc. ) to determine the exact nature of how changes will affect financial obligations, federal aid, international status, and academic standing. Submission of this form indicated you are aware of the implications the above request, if approved, will have on your student record. Supporting documentation should be submitted concurrently with the request for exception. Decisions made by the committee are final. **STUDENT SIGNATURE:**       