

**Mount Saint Mary's University  
Application for Academic Waiver**

**Student** \_\_\_\_\_ **Student ID #** \_\_\_\_\_

**Student's Explanation of Why Waiver is Needed** \_\_\_\_\_

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**Recommendation of Academic Advisor** \_\_\_\_\_

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**Signature** \_\_\_\_\_  
**Date**

**Recommendation of Department Chair/Program Director** \_\_\_\_\_

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**Signature** \_\_\_\_\_  
**Date**

**Academic Waiver Granted** \_\_\_\_\_ **Academic Waiver Denied** \_\_\_\_\_

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**Dean for Academic Affairs** \_\_\_\_\_  
**Date**