



Policy Exception Request

A student seeking an exception to an individual program, Graduate Programs, School of Business, or university policy due to extenuating circumstances must submit a Policy Exception Request.

Guidelines:

- A policy exception request must be accompanied by documentation of extenuating circumstances.
- Students should not assume that policy exception requests will be approved.
- Until a student receives written confirmation that an exception has been approved, the student should operate under the assumption that it will be denied (i.e. the student should continue to attend class, submit assignments, consider alternatives, etc).

Requests involving medical or mental health issues:

- Requests involving physical health must be accompanied by documentation from a medical professional. Such documentation will be considered, but it does not solely determine the outcome of the request.
- Requests involving mental health must be accompanied by documentation from a medical professional. In addition, we strongly recommend students reach out to the University Counseling Center (UCC). Support of the UCC will be considered, but it does not solely determine the outcome of the request.

The following requests will not be considered:

- Requests for exceptions to individual program, Graduate Programs, school, or university on the basis of not knowing the policy.
- Requests after the module/semester has ended, the final project and/or exam has been attempted, or a grade has been issued will not be considered.



Policy Exception Request Form

Student Name _____ GWID G
First Name Last Name

GW Email _____ @gwmil.gwu.edu Phone Number () _____

Degree _____ OR Certificate Program _____

I hereby request the following exception to University, School of Business, or Program policy:
(State the request and list the policy affecting your request. Please use complete sentences and use a separate sheet if additional space is needed.)

Student Signature _____ Date _____

DO NOT WRITE BELOW THIS LINE - FOR UNIVERSITY OFFICIAL USE ONLY

Authorized Approver
Signature and Date _____

Approve Deny

Comments: