Request to Waive GRE

For the Master of Science in Safety Management School of Health Sciences

Oakland University Graduate Admissions 520 O'Dowd Hall Rochester, MI 48309-4475 gradinfo@oakland.edu

First Name:		Last Name:	
Add	lress:		
		Daytime Phone:	
Adm	nissions term:		
insti GRE subr	itution not accredited by a regiona Erequirement if at least one of the	from the Graduate Record Examination (GRE) if they graduated from an l accrediting agency of the USA. The department may choose to waive the following special circumstances is met. To request a waiver, applicant must edu as part of the application packet. The request for waiver is subject to	
Plea	ase check the appropriate respons	e:	
	Applicant's last degree is from	a U.S. institution accredited by a regional accrediting agency.	
	Name of institution		
	Degree earned	Overall GPA Year earned	
	Applicant's overall GPA from la	ast degree is at least 3.0 on a 4.0 scale.	
	Name of institution		
	Degree earned	Overall GPAYear earned	
		SA for at least two years in the Environmental Health and Safety	
	Profession (please attach docu	mentaiton from company to verify employment).	
	Name of company		
	Company address		
	Job title		
		Date:	
— То b	be completed by M.S. program Dir	ector or Dept. Chair (when reviewing final application file):	
	Approved	Denied	
Com	nments :		
Nam	ne (print or type):		
	naturo.	Date	