

Exception Request (Alternative Criteria) Renewal Cover Sheet

Date: _____

Department/College Requesting Exception: _____

Contact person for Exception: _____

Exception for (name of candidate): _____

Specific Field or Course(s) for which the exception applies: _____

Attached to this form:

____ Prior approved exception cover sheet

____ Verifiable documentation that supports valid reason for continued exception.

For graduate teaching only: [Graduate Faculty Nomination](#) process has been initiated. Please attach copy of the submission email.

Provost Office

____ Prior exception approval on file

____ Accept the program request for renewal

____ Return to program curriculum committee (additional information attached)

____ Request a second opinion from Faculty Senate

Faculty Senate (if requested)

____ Exception accepted on _____ (date) for _____ length of time

Needs to be reviewed again before _____ Semester

____ Exception denied

Provost Office

____ Approved to teach undergraduate courses until _____

(Initial)

____ Denied