

Request for an Exception to a College of Education Academic Policy

*College of Education
Mississippi State University*

Student's Name _____

Student's MSU ID Number _____

Student's Major _____

Academic Record:

Hours Attempted _____

Overall QPA _____

Hours Passed _____

QPA at MSU _____

Exception Requested:

Reasons or Rationale for Exception:

Conditions to Be Met if Exception Granted:

Approved

Date

Advisor

Department Head

Dean