

OAKLAND UNIVERSITY
School of Health Sciences – Environmental Health & Safety
Prerequisite Requirements – DEPARTMENT PETITION OF EXCEPTION (DPOE)

Use this form when petitioning for an exception to the prerequisite requirement for the Environmental Health & Safety Major. The student is required to complete and sign this form in ink (blue or black) and NOT to use cursive handwriting. Do note that a Petition of Exception can take 2-6 weeks (depending on the time in the semester).

DPOE Process:

1. Student completes the DPOE and clearly indicates in the request which course(s), course section number(s), professor and the anticipated semester student is requesting for each override. If there are multiple courses being requested, a student cannot use the same form for multiple professors. In the case where there are several course and several course, a separate DPOE must be completed for each professor. Student can attach supporting documentation to the petition form. DO NOT indicate “see attachment”. Student is still required to provide a brief supporting rational.
2. Return completed form to the academic advising office for the School of Health Sciences (1014 HHB).
3. Document(s) will be forwarded on to the professor.
4. The professor will complete their section of the form and return the document to the program director for review and the final decision.
5. Document will be forwarded to academic advising from the program director.
6. Student will be contacted via an Oakland University email of the final decision.

All decisions made are final and not subject for appeal. Additional questions regarding the decision should be directed to the program director for the Environmental Health & Safety Major. By signing this document, you have agreed to the terms and conditions of the decision process and the time this process may take.

NAME: (Last)	(First)	GRIZZLY ID NO: G00	
STREET ADDRESS:	Contact PHONE:	E-MAIL ADDRESS:	@oakland.edu

REQUEST:

SUPPORTING RATIONALE:

*(Student Signature)**(Date)*

FACULTY COMMENTS:

*(Faculty Signature)**(Date)*

(FOR OFFICE USE ONLY)

DISPOSITION: Approved Denied (If you change major or minor, the decision on this petition may not apply.)

PROGRAM DIRECTOR COMMENTS:

*(Authorized Signature/ Faculty/Program Director Signature)**(Date)*