
Request to Waive GRE

For Ph.D. in Biomedical Sciences: Medical Physics
College of Arts and Sciences

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

First Name: _____ Last Name: _____

Address: _____

Email: _____ Daytime Phone: _____

Admissions term: _____

Applicants must submit official scores from the Graduate Record Examination (GRE) if they graduated from an institution not accredited by a regional accrediting agency of the USA. The department may choose to waive the GRE requirement if at least one of the following special circumstances is met. To request a waiver, applicant must submit this form to gradinfo@oakland.edu as part of the application packet. The request for waiver is subject to the approval of the Graduate Admissions Committee.

Please check the appropriate response:

- 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 last degree is at least 3.0 on a 4.0 scale.

Name of institution _____

Degree earned _____ Overall GPA _____ Year earned _____

- Applicant has worked in the USA for at least two years in the engineering profession (please attached documentation from company to verify employment).

Name of company _____

Company address _____

Job title _____

Applicant Signature: _____ Date: _____

To be completed by Ph.D. program Coordinator or Dept. Chair (when reviewing final application file):

- Approved Denied

Comments : _____

Name (print or type): _____

Signature: _____ Date: _____