



Records and Registration
304 O'Brian Hall
law-records@buffalo.edu

Petition for Waiver of Faculty Policy

Student Name _____ Date _____

UB Email address _____ Person Number _____

Current Professional Level _____

1. Action requested

Semester & Year _____

2. Reason for request

Student Signature _____

----- DO NOT WRITE BELOW THIS LINE -----

Comments

Vice Dean Signature _____ Date _____