

REQUEST FOR EXCEPTION FORM

This form must be completed by the Hiring Unit. Please submit this form to the Appointments Unit, 318 Sproul Hall MC 5900. **This form CANNOT be used for GSI Step IV advancements, GSI appointments with full responsibility for a course, for a student appointed over 50% time, or for early GSI advancements based on merit.** Contact the Appointments Unit at 642-7101 about these or any other exceptional appointment proposed for reasons not included on this form.

Last Name	First	Middle	SID
PERIOD OF EXCEPTION REQUEST			
<input type="checkbox"/> Fall 20__ <input type="checkbox"/> Spring 20__ <input type="checkbox"/> Other: _____			
APPOINTMENT TYPE			
<input type="checkbox"/> GSI <input type="checkbox"/> Reader <input type="checkbox"/> Tutor Course: _____			
<input type="checkbox"/> GSR <input type="checkbox"/> Staff/Other: _____			
Hiring Unit: _____			
_____		I concur with this request for exception.	
Hiring Unit Contact's Name <i>(Please Print)</i>		Email <i>(Please Print)</i>	
_____		_____	
Hiring Unit Signature Authorization		Student's Head Graduate Adviser's Signature	
_____		_____	
Date		Date	

1. GPA below 3.0

Indicate GPA: _____

- 1st/2nd semester grades
- Student and adviser have met; plan for improvement is in place
- Other reasons *(write below or attach additional comments):*

2. More than 2 Incompletes in upper division or graduate courses

- Student is in process of clearing; indicate anticipated date: _____
- Other reasons *(write below or attach additional comments):*

3. GSI appointment for 11th or 12th semester

Advanced to Candidacy? Yes No Date: _____

Number of GSI semesters prior to this appointment: _____

% time of GSI appointment: _____

- Student is in good academic standing; appointment will not affect progress towards degree
- Department has critical need; student is uniquely qualified
- Other reasons (*write below or attach additional comments*):

4. GSI/Reader/Tutor will assist in a graduate course (200, 300, 600) and student is not advanced to doctoral candidacy

% time of appointment: _____ & Title Code: _____

- Student will not be in competition with students taking the course for employment, fellowships, or grants
- Student will not assign grades (assignment of grades is the sole responsibility of the faculty member in charge of the course)

Name of Instructor of Record: _____
faculty member

If Reader or Tutor:

- Student has received a grade of “B” or better in the course
Semester & Year: _____

5. Early advancement for GSI because student has relevant post-baccalaureate teaching experience at another qualifying university/college

- Step II Step III

The following must be completed. Do NOT substitute resume, c.v., or academic biography.

Month/year student received bachelor’s degree: _____

Student has received a master’s degree OR completed at least 24 units of graduate work

Year	Term			Length of Course		Student’s Title			Course & Number	Name of University or College
	Fall	Winter	Spring	Quarter	Semester	TA/GSI	Reader	Lecturer		
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
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