GRE Waiver Form Francis College of Engineering



Office of Graduate Admissions 839 Merrimack Street Lowell, MA 01854 Graduate_Admissions@uml.edu 978-934-2390

Date:

Please note that this Waiver form is for Master's applicants only. If you are a current UMass Lowell student applying for the Bachelor's to Masters program, your GRE requirements are automatically waived.

Name:	
Student ID*:	
Email:	
Program Applying To:	
Desired Start Term:	
Please mark the box which best descri	bes the basis on which you are requesting a GRE Waiver.
	ces or engineering program at an ABET accredited institution ulative GPA of 3.00 or greater.**
Completed a graduate certifica with at least a 3.50 cumulative	te in a relevant sciences or engineering program at UMass Lowell GPA.
Earned a graduate degree (Mas an accredited institution in the	sters, Ph.D, etc.) in a relevant sciences or engineering program from United States.**
Other**	
*You will receive a student ID after you beg	in an application and submit the application fee.
**Please note that your waiver request can received by graduate admissions.	not be reviewed until an application and supporting documentation, such as transcripts, are
Please check the following boxes:	
I acknowledge that UMass Low	vell makes the final decision as to whether to waive the GRE requirement.
I confirm that the information	provided is accurate.
Student Signature:	Date:
Please email the form as an attack	hment to the Graduate Coordinator for the Program you are applying.

Content Below Line for Graduate Coordinator to Complete

Graduate Coordinator:

Notes:

Denied

Approved