Ph.D. Course Waiver Petition Form
Biosystems and Agricultural Engineering

Student Name: ________________________________

Ph.D. Advisory Committee Chair/Co-Chair: ________________________________

Ph.D. Committee Members: ______________________________________________

Category (check one):

☐ Scientific Paper   ☐ Grant/Fellowship   ☐ Intellectual Property

☐ Design Experience   ☐ Instruction

Credit Hours Requested (check one):

☐ 1 credit hour   ☐ 2 credit hours   ☐ 3 credit hours

Supporting Documentation:

Scientific Paper
☐ Justification   ☐ Statement of Acceptance   ☐ Galley Proof

Grant/Fellowship
☐ Justification   ☐ Grant Application   ☐ Statement of Submittal

Intellectual Property
☐ Justification   ☐ IP Application   ☐ Statement of Acceptance

Design Experience
☐ Justification   ☐ Design Reports, Drawings, etc.   ☐ Reference Form

Instruction
☐ Justification   ☐ Syllabus   ☐ Sample Lesson Materials

Date of Application: ________________________________

Student Signature: __________________________________________

Advisor Signature: __________________________________________

Co-Advisor Signature: _________________________________________

Director of Graduate Studies Signature: _____________________________

Department Chair: ____________________________________________
This form must be submitted for each engagement claimed as qualifying design experience.

PART A – TO BE COMPLETED BY THE STUDENT
I, the student, hereby demonstrate qualifying design experience that is relevant to my area of study and is consistent with professional standards of competency.

Student Name: ___________________________________________

Area of Study within BAE: __________________________________

Engagement Number: ______________________________________

Employment Dates (MM/DD/YYYY): __________________________

Total Time Worked in Months (for this engagement): ___________

Employer, Employer's Address, and Student’s Title: ______________

Reference, Reference’s Title, Reference’s Address, Reference’s Email, and Reference’s Phone (including area code and extension): __________________________

Description of Engineering Tasks and Duties:

Level of Responsibility:

Description of Engineering Decisions Made:

Projects:
REFERENCE FORM

PART B – TO BE COMPLETED BY THE REFERENCE

My relation with the Student has been/is: □ Employer/Supervisor □ In Responsible Charge*
☐ Co-Worker/Associate* □ Reviewed Work* □ Other*

Do you verify the Student’s experience on Part A? □ YES □ NO

Have you personally seen and reviewed the Student’s engineering work? □ YES □ NO

Do you consider the Student’s design experience to be within the stated area of study? □ YES □ NO

Do you consider the Student’s design experience to be consistent with professional standards of competency? □ YES □ NO

*Explain in detail all responses marked with an asterisk. Attach additional sheets if needed.

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I certify that these statements are true and correct to the best of my knowledge and that I have personally reviewed and examined the student’s engineering work.

Signature of Reference: ___________________________________________ Date: ________________