



## Request to Waive English Proficiency Requirement

Please complete, print (see "Print Form" button above), sign, and return this form to the Office of Admissions, University Hall, One University Plaza, MS UHB 1080, Springfield, IL 62703-5407. Please be sure to carefully complete all information prior to printing the document. A scanned form may also be emailed to [incomingtranscripts@uis.edu](mailto:incomingtranscripts@uis.edu) for consideration. The form must be accompanied by supporting documentation.

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ UIN \_\_\_\_\_

E-mail \_\_\_\_\_ Daytime Phone \_\_\_\_\_

Type of Request \_\_\_\_\_

I base this request on the following rationale: (Please feel free to attach additional documentation)

\_\_\_\_\_  
Signature of Student/Participant

\_\_\_\_\_  
Date

Current Semester

**Approved** (Printed Name/Signature)

**Denied** (Printed Name/Signature)

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Admissions

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Admissions

\_\_\_\_\_  
Date