Waiver for an Ethics Competency/Requirement

Student’s name (please print): _______________________________________

Student’s Department (please print): _________________________________

Academic Advisor (please print): _________________________________

The student listed above has mastered most or all of the following competencies in the public health ethics discipline and is requesting a waiver for competencies that have been adequately addressed prior to admission to the UTSPH program.

Waiver of the Ethics Requirement:

*List the competencies that have been mastered in the relevant public health discipline along with the specific course(s) and/or experiences responsible for the mastery.*

<table>
<thead>
<tr>
<th>Competency</th>
<th>How the competency has been met</th>
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</thead>
<tbody>
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</table>
Substitution of an ethics competency with an advanced course:

List the competency which has not been met and the advanced course that will be taken in order to meet the requirement.

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<tr>
<th>Competency</th>
<th>Course substitution</th>
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</table>

I, __________________________________, verify that the student listed above has successfully mastered the indicated competency (ies) or, where indicated, will complete the ethics requirement by taking an advanced UTSPH course.

Academic Advisor:

______________________________  ______________________
Signature                        Date

Course Instructor:

______________________________  ______________________
Signature                        Date

Assistant Dean of Academic Affairs and Student Services:

______________________________  ______________________
Signature                        Date

Send original document with signatures to:

Academic Affairs and Student Services RAS E201
1200 Pressler
Houston, TX 77030