

GRE WAIVER GUIDELINES

Background: The purpose of the GRE is to assess an applicant's analytical writing, verbal reasoning, and quantitative reasoning skills to evaluate success in graduate-level academic work. It is not the only metric used to determine likely success in a graduate program, but it is an important one. Other metrics include a personal statement, work history, prior academic work, and references. Because we value professional work experience, graduate course work, and high academic achievement, we have created this pathway to allow students to request a waiver for the GRE requirement.

Process: Applicants who wish to apply for a waiver of the GRE requirement should complete the Application for GRE Waiver form (included) and submit the required documentation. The review process generally takes 5-7 business days.

Summary of the process:

1. Applicant completes the Application for GRE Waiver and submits it to the Admissions and Recruitment Manager with a cover letter and supporting documentation (unless it has already been submitted with your online application)

Admissions and Recruitment Manager Jefferson College of Population Health 901 Walnut Street, 10th Floor Philadelphia PA 19107 T 215-503-5305 F 215-923-7583 April.Smith@jefferson.edu

- 2. The Admissions and Recruitment Manager sends the request to the Program Director for review.
- 3. If the Program Director approves, the Admissions and Recruitment Manager forwards to the Director, Office of Academic Affairs for final approval.
- 4. Applicant is notified of the decision.



APPLICATION FOR GRE WAIVER

Applicants may request a waiver of the GRE requirement for a program in the Jefferson College of Population Health (JCPH). Before completing this form, please review the GRE Waiver Guidelines (included).

CONTACT INFORMATION:		
Name:		Date of Birth:
Address:		
Telephone:	Email:	
Application in Progress (chec	ek one): Yes No	
BASIS OF GRE WAIV	ER REQUEST (CHECK	ALL THAT APPLY)
GPA of 3.5 or higher GPA of 3.5 or higher GPA of 3.5 or higher Distinguished US representation to the control of the control o	er in prior graduate course military service with progr egree (i.e., MBA, MHA, M dited college or university on of peer-reviewed journ	ergraduate college or university e work essive increases in rank and D, DO, PharmD, PhD, JD, DDS, DNP,
-	ion for a GRE waiver, you plaining why a GRE waive that supports your request	must attach to this form:
authorizing the University information I have submit	to conduct whatever back ted. I acknowledge that su waiver of the GRE applica	RE application requirement and aground check is necessary to verify the abmitting this information does not ation requirement and that such waiver is allation Health.
Applicant Signature:		Date:
Program Director Approva	վ։	Date:
Director, OAA Approval:		Date: