



## 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 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 (other side) and submit the required documentation. The review process takes 5-7 business days.

Waivers will not be reviewed until an application has been submitted and the application materials have been received.

### 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, 10<sup>th</sup> Floor  
Philadelphia PA 19107  
T 215-503-5305  
F 215-923-7583  
[April.Smith@jefferson.edu](mailto:April.Smith@jefferson.edu)

2. The Admissions and Recruitment Manager reviews the request and sends the request to and cover letter the Program Director for review.
3. If the Program Director approves, the request is processed, and the application is updated in the applicant portal.
4. Applicant is notified of the decision.



### APPLICATION FOR GRE WAIVER

Applicants may request a waiver of the GRE requirement for a master's degree program in the Jefferson College of Population Health. Before completing this form, please review the GRE Waiver Guidelines (reverse side).

#### CONTACT INFORMATION:

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Application in Progress (check one): **Yes** \_\_\_\_\_ **No** \_\_\_\_\_

#### BASIS OF GRE WAIVER REQUEST (CHECK ALL THAT APPLY)

- ☐ At least five years of professional work experience
- ☐ GPA of 3.5 or higher from an accredited undergraduate college or university
- ☐ GPA of 3.5 or higher in prior graduate course work
- ☐ Distinguished US military service with progressive increases in rank and honors/awards
- ☐ Earned graduate degree (i.e., MBA, MHA, MD, DO, PharmD, PhD, JD, DDS, DNP, etc.) from an accredited college or university.
- ☐ Record of publication of peer-reviewed journal articles, technical reports or other written scholarly products

#### SUPPORTING DOCUMENTATION & SIGNATURE

To complete your application for a GRE waiver, you must attach to this form:

1. A cover letter explaining why a GRE waiver should be granted.
2. Documentation that supports your request (unless it was submitted with your online application).

By signing below, I am requesting a waiver of the GRE application requirement and authorizing the University to conduct whatever background check is necessary to verify the information I have submitted. I acknowledge that submitting this information does not automatically constitute a waiver of the GRE application requirement and that such waiver is at the sole discretion of the Jefferson College of Population Health.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Request Approved

Request Denied; Reason:

Program Director Approval: \_\_\_\_\_ Date: \_\_\_\_\_