

PA Admissions Waiver Request Form

| Applicant: | Date: |
|--|---|
| Reason for Request | |
| ☐ Timeline Waiver | |
| A waiver of the five-year requirement may be grant history that would demonstrate knowledge of the does not satisfy any of the prerequisites. | • • |
| ☐ In-person Lab Waiver | |
| A waiver of the online lab demonstrates rigor equinteractive, hands-on experiences aligning with a testing does not satisfy any of the prerequisites. Please check the prerequisite course below that reper form. | raditional in-person lab. Knowledge-based |
| ☐ Biology with Lab (8) | ☐ Genetics (3) |
| ☐ Chemistry with Lab (8) | ☐ Medical Terminology (1) |
| ☐ Biochemistry / Organic Chemistry (3) | ☐ English Composition (3) |
| ☐ Microbiology with Lab (4) | ☐ General Psychology (3) |
| ☐ Human Anatomy & Physiology with Lab (8) | ☐ Statistics (3) |
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| In the section below, please indicate which o are documenting in your waiver request. | ption from above that you |
| Employment History: (Experience demonstrates Please explain in detail referencing the prerequis | • |
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| Academic History: (Comparable or complementary experience – Please explain in detail referencing the prerequisite course.) | | | |
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| Equivalent Online Lab: (Comparable experience – Please explain in detail referencing the prerequisite course.) | | | |
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| Please attach any additional documentation to support your explanation. | | | |
| Student Signature | | Date | |
| Email the completed form to pa@naz.edu. | | | |
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| PA Program Use Only | | | |
| Program Review Date: | | | |
| Program Director Signature: | | Date: | |
| Decision: | ☐ Approved ☐ Denied | | |