

Graduate Program in Health Economics and Outcomes Research Request to Waive Seminar (HEOR 597)

On a quarterly basis, PhD students may request to waive CHOICE seminar (HEOR 597) if it conflicts with other core or elective courses with approval of the student's academic advisor. This form is used for seminar waivers only. If waiving a different required course, refer to [the alternate course waiver form](#).

Process:

1. The student should discuss their situation with their faculty advisor.
2. The student completes seminar waiver request form and submits to academic advisor/chair for signature.
3. Signed waiver is sent to Graduate Program Manager (Marina Gano, mcgano@uw.edu).
4. Student informs CHOICE seminar instructor of their expected absence.

Policy note: effective Fall 2025, students must still complete the required number of seminar credits prior to graduation. This excludes any credits approved for a waiver prior to Fall 2025.

1. Student Details:

Today's Date: _____ Student Name _____

UW Email Address _____ Year Entered Program _____

Advisor/Chair Name: _____

2. Seminar Waiver Request:

Quarter/ Year Requested (e.g. Fall 2025): _____

3. Brief Description of Time Schedule Conflict:

4. Required Signatures:

Student Attestation: As part of this waiver process, I confirm that upon approval from my advisor, I will inform the seminar instructor of my expected absence/non-enrollment for the quarter listed above. I will do this no later than 7 days into the academic quarter where the waiver applies. If previously registered for the course, I will drop the course from my schedule. I will also send this completed, signed form to the Graduate Program Manager for my student file and degree audit record.

Student Signature: _____

Student's Faculty Advisor Signature: _____