

California State University, East Bay Graduate Residency Waiver

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|-----------|-------|-----------------------|--------|
| Last Name | First | MI | Net ID |
| Address | | Major | |
| | | Horizon Email Address | |

CSUEB requires that 70% of all units used in a master's degree program be taken in residence

Residence Units Required in Program : _____

Justification: _____

| Course Number | Course Title | Units | Grade | Where Taken |
|---------------|--------------|-------|-------|-------------|
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| Student Signature | X _____ | _____ Date |
| Approval of Graduate Dept. Chair Or Graduate Coordinator | X _____ | _____ Date |
| Approval of Graduate Studies | X _____ | _____ Date |