

ORAL ENGLISH PROFICIENCY TEST (OEPT) WAIVER FORM

CENTER FOR ENGLISH AS A SECOND LANGUAGE, UNIVERSITY OF CINCINNATI

Fı	ıll Name of Student	Student's UC ID Number
Has b	een awarded a graduate/teaching assistan	ntship in the Department/College of:
student s	should be exempt from taking the OEPT b	pagety of the following reason (about t
that appl	ies):	
that appl		
	ies):	(please attach copy of TOEFL)
	ies): scored 26 or higher on the TOEFL iBT	(please attach copy of TOEFL) king (please attach copy of IELTs) , and whose first language is Englis

This is a legal document. The department head or graduate program director upon submitting this document attests to the student's oral English proficiency therefore allowing the student to take on classroom-related services without restrictions. Signature is not required if emailed to oeptl@uc.edu. Please make sure to attach additionally requested documents along with this form.