Request for Exception to DIT® Requirement

This form is designed to serve as the request for an exception, and as the official record of the review process/findings and approval or denial of the exception. An exception must be approved by IADC before it is implemented by the training provider. Please see the instructions for completing the form on the following page.

Section to be completed by Provider:

Provider Name: _____ Accreditation #_____

Person Requesting Exception: _____ Phone #: _____

Course(s) to be affected by the exception:
List course titles affected:

DIT Requirement for which Exception is Requested:

Type of Exception Requested:

Explain why are you requesting this exception:

How will you conduct/manage course delivery to assure conformance with the intent of the DIT requirement?

![IADC DIT logo]

Request for Exception to DIT® Requirement

Signature of Primary Contact:	Date:

Phone number:	Email address:

Submit completed form to the DIT Accreditation Coordinator at dit@iadc.org.

Section to be completed by Reviewer:

Name of Reviewer:

Response to Request:

Decision: ☐ Approve   ☐ Not Approve   ☐ Request more information

☐ Approve conditionally with the following alteration to course management plan:

Signature of Reviewer:

Send completed form to DIT Accreditation Coordinator at dit@iadc.org.

Decision of Approver:

Decision: ☐ Approve   ☐ Not Approve   ☐ Approve conditionally, list conditions below:

If not approving, provide reason:

Signature of Approver:	Date:

Instructions for Providers

In the **Provider section**, the person requesting the Exception should record the Provider's name, Accreditation number (if assigned), and the course(s) to be impacted by the Exception. State the applicable DIT requirement (including page number and verbiage from the *Handbook* DIT-01) for which the Exception is being requested and state concisely the type of exception requested. Fully explain why you are requesting this exception and describe in detail how you will conduct/manage the course(s) delivery to assure conformance with the intent of the DIT requirement. For example, if a variance of the student number limit is requested for one instructor and one simulator, the explanation might be that additional course time is being added to assure each student will have

sufficient simulation time to complete all required exercises. After signing that section, the requester should provide a contact phone number and email address.

Once this section of the form is completed, the training provider should send the form to the DIT Accreditation Coordinator at dit@iadc.org.

Instructions for Reviewers

In the **Reviewer section**, the Reviewer should enter his/her full name and list the merits of the exception requested, including key points upon which the Reviewer's recommendation is based. The Reviewer's recommendation options are:

- Approve as proposed
- Approve conditionally – An explanation of the condition(s) to be met by the provider before approval should be listed
- Not approve
- More information – Indicate what additional information or explanation from the training provider is to be requested.

The Reviewer should check the appropriate box to indicate the Reviewer's recommendation, sign the form, and return the form to the DIT Accreditation Coordinator at dit@iadc.org.

Instructions for Approvers

In the **Approval section**, the person authorized by IADC's Accreditation & Credentialing Division to approve Exception requests should review the request of the training provider and the recommendations of the Reviewer before making the decision to grant or deny approval. Conditional approval may also be granted. Check the appropriate box to indicate the decision and list the condition(s) that must be met by the training provider if conditional approval is indicated. Sign the form and enter the date of decision. If the decision is to deny the request, please indicate reason for the denial. (This is the reason that will be communicated to the training provider requesting the Exception.)