



Entered by Registrar's office

Date:

By:

## Course Waiver/Substitution Request Form

(Note: The waiver of a requirement and/or substitution does not waive the credit value. The student must still complete the required number of credit hours toward the degree.)

Date:		Department:	
Student Name:			Student ID#:
Major, Concentration and Minor (if applicable):			
Area impacted: <input type="checkbox"/> Core <input type="checkbox"/> Major <input type="checkbox"/> Concentration <input type="checkbox"/> Minor			
Type of request:  <input type="checkbox"/> Substitution  <input type="checkbox"/> Waiver (No course replacing requirement)		Course(s) to be Waived or Substituted:	
		Course(s) to be used in place (Substitutions only):	
Explanation of rationale for request:			
Approved? <input type="checkbox"/> Yes <input type="checkbox"/> No		Signature of Department Chair:	
Date:			
Approved? <input type="checkbox"/> Yes <input type="checkbox"/> No		Signature of Vice President for Academic Affairs:	
Date:			

CC: Department Chair  
 Faculty Advisor  
 Student