

RECOMMENDATION FOR COURSE SUBSTITUTION OR WAIVER

*Minimum hours required for graduation must be met even though a course is substituted or waived.

INSTRUCTIONS: This form is to be completed by the student's major/minor department chair; then sent to the college dean of the student's major for final approval. The dean will forward to the Registrar's Office for processing.

Student's Name _____ Student's ID _____ Major/Conc _____

Major Course:

Course number and title required for the major that WILL NOT be taken but is being substituted or waived: <small>Must indicate a specific course – use degree audit:</small>	WAIVE Place X in this column:	SUBSTITUTE Indicate the course taken to be substituted to meet the requirement and the session/year taken: (ie: ART100 FA16 or TR for transfer course).
Major Course:		

General Education Course:

Gen Ed Course Requirement:	WAIVE Indicate # of semester hours (s.h.) in this column:	SUBSTITUTE Indicate the course taken to be substituted to meet the requirement and the session/year taken: (ie: ART100 FA16 or TR for transfer course).
Written Communication (not the competency)		
Oral Communication		
Math & Computational Thinking		
Natural Science-Lab		
Natural Science-NonLab		
Historical/Behavioral/Social Science		
Philosophical/Literary		
Visual/Performing Arts		
Global Awareness-Historical		
Global Awareness-NonHistorical		
Wellness		
Gen Ed Competencies:	Indicate # of courses or units in this col.:	Indicate the course taken to be substituted to meet the requirement and the session/year taken:
Written Communication		
Critical Thinking		
Experiential Learning (1 unit or 2 units) <small>*EL should only be waived when student did not complete a course or EL outside of a course.</small>		This form cannot be used to substitute a course for the EL competency. The EL Verification Form must be completed and submitted to record EL Experience.

Minor Course: Indicate Minor: _____

This substitution/waiver request will be filed in the student's official file in the Registrar's Office. It will not appear on degree audits

Reason for request _____

APPROVALS

1. Advisor _____ Date _____

2. Major Department Chair _____ Date _____

3. College Dean of Student's Major _____ Date _____

College Dean – If approved, forward completed form to Registrar's Office for processing/filing in student's academic folder.
If denied, return form to student's advisor.

Date Processed by Registrar's Office _____

Updated 02/2018