

COURSE SUBSTITUTION AND WAIVER FORM

Name _____ Royal ID _____ Check if graduating Senior

Major _____ Minor _____

COURSE SUBSTITUTION

The aforementioned student has permission to substitute the following course(s):

COURSE REQUIREMENT OR GE AREA		SUBSTITUTION	
COURSE #	TITLE	COURSE #	TITLE
_____	_____	_____	_____
_____	_____	_____	_____

Reason for substitution(s) and state which area requirement is intended: _____

(If more space is needed, use reverse side.)

WAIVER

The Registrar is hereby authorized to document a waiver of _____
(COURSE #)

(COURSE TITLE)

otherwise required in this student's program. This waiver does not constitute a reduction of required credits.

Reason for waiver: _____

Recommended

Not Recommended
Chair of Student's
Major
Date _____

Recommended

Not Recommended
Dean of Required
Course or GE
Area
Date _____

Recommended

Not Recommended
Dean of School in
which Student is
Enrolled
Date _____