



PETITION TO WAIVE/SUBSTITUTE ACADEMIC REQUIREMENT

Last Name (Print) First Name Date

I hereby petition to have the following academic requirement(s) waived. Mark those that are applicable.

Major, minor, or program requirement
State the requirement _____
(Requires Approval of Department Chair and Academic Dean)

Last 30 credit residency requirement
Complete the Transfer Course Approval Form and attach to this document.
(Requires Approval of Academic Dean)

Other requirement for graduation
State the requirement _____
(Requires Approval of Academic Dean)

Reason for petition:

Student Signature _____

Petition _____ Granted or Refused	_____
	Department Chair Approval (as needed)
Petition _____ Granted or Refused	_____
	Academic Dean Approval (required)

Completed form with approval signatures must be submitted to the Registrar's Office, 201 Haas Administration.

Office Use Only - Date Received: _____