PETITION FOR CHANGE OR SUBSTITUTION
OFFICE OF THE REGISTRAR

Student Name: _____ ID Number: _____

Major(s):_____ Minor(s):_____

School in which program change would occur: _____

Type of Program Change Requested: Waiver Substitution (circle one)

Requirement: Proposed Change or Substitution:

_____ _____

_____ _____

Justification for Request (to be completed by the student and/or advisor): Additional pages may be attached as needed.

_____

_____

_____

_____

_____

_____ _____

Student Signature Date Advisor Signature Date

Action approved _____ Action approved _____
Action denied _____ Action denied _____

_____ _____

Department Chair Signature Date School Dean Signature Date

GENERAL-EDUCATION SUBSTITUTION OR WAIVER

Substitutions or waivers in general-education courses must be approved by Deans Council.

Action approved _____ Action denied _____

_____

Provost Date

NOTE TO STUDENT: PLEASE ATTACH AN UNOFFICIAL COPY OF YOUR TRANSCRIPT BEFORE SUBMITTING THIS REQUEST TO YOUR ADVISOR FOR APPROVAL. THE COMPLETED FORM MUST BE RETURNED TO THE REGISTRAR'S OFFICE.