



Student Name		Student ID	
Course Title			
Course Number		Course Credits	
Term		Year	

Rationale for Waive/Substitute course

Student Signature			
Instructor Signature		Date	

<i>UG Office Use Only</i>	Dual Student	Yes	No	Waive Course	Yes	No
	Prior Degree	Yes	No	Substitute Course	Yes	No
	Authorized Signature				Decision Date	