## **Undergraduate Course Substitution or Waiver**

Date:				
Name:		Student ID:		
ajor:		Minor:		
Teaching Field(s)	Ca	Catalog Year:		
If you have applied for Graduation, enter date:	May 20	August 20	December	20
A justification for the substitution or waiver me each substitution except when the additional re	v		v	ve used for
NOTE: If you are using a substitution or waiv additional credit hours to meet the minimum to	• •		-	
REQUIRED COURSE		COURSE TO BE USED AS SUBSTITUTE (Write "waiver" if appropriate)		
(Include Subject Code and Course Number)		(Include Subject Code and Course Number)		
APPROVALS:				
Academic Advisor Date		Department Chair (of Re	equired Course)	Date