

☐ WAIVE REQUIREMENT

☐ TAKE OVER 18 HOURS (

☐ PARTICIPATE IN COMMENCEMENT



Received by Division Date Initials

Received by Registrar Date Initials

Obtain recommendations from adviser and instructor/discipline/division/committee. Submit completed form to appropriate division office. \_\_\_\_\_Date\_\_\_\_\_\_ID#\_\_\_\_\_\_Campus Box#\_\_\_\_\_ Name Major \_Campus\_\_\_\_\_ Request: Reason: Student's Signature Comments By Adviser Adviser's Signature Recommendation By Instructor/Discipline/Division/Committee Signature FOR OFFICE USE ONLY VERIFICATION OF REQUEST: ACTION: REMARKS: ☐ APPROVED DATE  $\square$  ADD CLASS LATE □ DROP CLASS LATE ☐ DENIED DATE ☐ CHANGE LG TO PF BASIS LATE □ DEFERRED DATE ☐ CHANGE PF TO LG BASIS LATE BY: □ SUBSTITUTE COURSE FOR GENERAL EDUCATION □ ACADEMIC COUNCIL □ CURRICULAR ADJUSTMENT COMMITTEE □ SUBSTITUTE COURSE FOR MAJOR REQUIREMENT ☐ COUNT EXTRA PE OR ENSEMBLE CREDIT FEE DUE \_\_\_\_\_ TOWARD GRAD

DATE NOTIFIED \_\_\_\_\_