

**Waiver – Form #1**  
**STUDENT**  
**Course Waiver Application**

Complete one form for each course waiver requested and submit to the Office of the Assistant Dean Academic Affairs by THE FRIDAY OF THE SECOND WEEK OF THE RELEVANT TERM.

Date \_\_\_\_\_ Program \_\_\_\_\_ Student # \_\_\_\_\_

Student Name \_\_\_\_\_

Course Waiver Requested: Course Name \_\_\_\_\_ Number: \_\_\_\_\_

**Basis of Waiver Application**

Previous Course	Completed	University	Year	Grade

(Attach a calendar course outline **AND** course description, names(s) of textbooks and any other pertinent information). PLEASE USE ONE FORM PER COURSE.

**Normally a course waiver is granted to students who have completed courses with similar content with the past 4 years, and achieved a grade of B- or better. If you do not meet these standards, please indicate below why a course waiver should be granted to you for this course.**

Office of the Assistant Dean Academic Affairs verification of transcript:

\_\_\_\_\_

**This form to be forwarded by the Assistant Dean 's (Academic Affairs) Office to the Course Director for review of course content and recommendation to Academic Standards Class Committee.**

## Course Waiver – Form # 2

### COURSE DIRECTOR

### Course Waiver Review

Course Director to review documentation submitted by Office of the Assistant Dean Academic Affairs and complete appropriate section.

Return form to the Assistant Dean, Academic Affairs by the **WEDNESDAY OF THE THIRD WEEK OF THE RELEVANT TERM**

Student Name: \_\_\_\_\_ Course: \_\_\_\_\_

I have reviewed the request for course waiver and **on the basis of content**, I recommend: **(check one)**

1. **No Waiver** \_\_\_\_\_

2. **Full Waiver** \_\_\_\_\_

3. **Partial Waiver** \_\_\_\_\_

**Student must attend** and complete the following classes, labs, tests, and exams. (List specific dates of classes, tests and exams) The student will complete:

1. \_\_\_\_\_ 4. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

This content constitutes \_\_\_\_\_% of the course. **Final grade will be based on:**

4. **Challenge Examination** (based on the information provided, a course waiver cannot be granted. A challenge examination will be provided as follows, and if the student receives a grade of B- or better, a full waiver will be granted).

Date \_\_\_\_\_ Time \_\_\_\_\_ Location \_\_\_\_\_

5. **Course Audit** \_\_\_\_\_

(Student is recommended to attend classes but not required to submit assignments, or write tests and/or examinations)

Signature of Course Director \_\_\_\_\_ Date \_\_\_\_\_

**This form to be forwarded to the Assistant Dean, Academic Affairs by the second Wednesday in September. The Assistant Dean Academic Affairs will communicate the Course Director's recommendation to the Academic Standards Class Committee.**

**Course Waiver – Form #3**  
**ACADEMIC STANDARDS CLASS COMMITTEE**  
**Course Waiver Decision**

The Academic Standards Class Committee will meet BY THE FRIDAY OF THE THIRD WEEK OF THE RELEVANT TERM to review course waiver applications. Students will be notified immediately of the Committee’s decision by the Assistant Dean Academic Affairs.

Student Name: \_\_\_\_\_ Course: \_\_\_\_\_

Having considered the student request and the recommendation of the Course Director, and taking into account the year the course was completed and the grade received, the Academic Standards Class Committee decision is:

1. **Full Waiver** \_\_\_\_\_
2. **No Waiver** \_\_\_\_\_
3. **Challenge Exam** \_\_\_\_\_
4. **Partial Waiver** \_\_\_\_\_

**As outlined by Course Director**

different: \_\_\_\_\_

Signature Chair of Academic Standards Class Committee: \_\_\_\_\_

*If a full waiver is recommended by the Course Director and the student’s achievement meets the criteria, the Assistant Dean Academic Affairs may sign on behalf of the Chair of the Academic Standards Class Committee.*