



Degree Checking Office

Request for Course Substitution/Waiver

<u>Student Information</u>	<u>Advisor Information</u>
Name:	Advisor Name:
PSU ID:	Department:
Major/Minor:	Advisor Phone:
Email:	Advisor Email:
Phone:	Date:

This form is to request a substitution or waiver for a requirement within the Department of _____ related to the major or minor. **NO GENERAL EDUCATION REQUIREMENTS CAN BE SUBSTITUTED USING THIS FORM.** Contact **Transcript Analysis, Extension 4253**, concerning general education requests.

Requested Course Substitutions:

<u>Required Course:</u>				<u>Proposed Sub/Requirement to be used:</u>					
Course Prefix:	Course Number:	Course Title:	Credit Hours:	Course Prefix:	Course Number:	Course Title:	Credit Hours:	Term Taken:	Grade in Course:

Comments:

Requested Course Waiver:

Course Prefix:	Course Number:	Course Title:	Area/Category listed on Major/Minor:	Credit Hours:	Justification for Waiver

Recommended by Advisor (Signature Optional):

Approved by Chair (Signature Required):