COURSE WAIVER

Date ____________________

Name ___________________________________________ Banner ID ______________________

Major __________________ Minor __________________

The waiver policies are as follows:

1. In areas where the student is in or plans to apply for teacher certification, the waiver requires the signature of the Director of Teacher Education.

2. For a waiver in minor requirements, the waiver requires the signature of the minor department head.

___________________________________________________________ may be waived for graduation.

Explanation: ____________________________________________________________________________________

___________________________________________________________

Advisor Department Head Dean

___________________________________________________________

VPAA Registrar