

## **REQUEST FOR ADJUSTMENT TO ACADEMIC REQUIREMENTS**

This form is used to request exceptions to major, minor and degree requirements for graduation purposes. It is the student's responsibility to provide rationale and/or documentation justifying the exception requested. Once the form has been completed and all approval signatures have been obtained, return the form to the Yote Stop for processing.

Name: ID#:					
Graduation application on file? Yes No	Current Cat	alog Year:			
Major/Minor area affected by ad	justment: 1	:			
Anticipated Graduation Date:	FA 20	SP 20	SU 20	WI 20	
REQUIREMENT SUBSTITUTION:					
I request that this course/requirement:		t	aken at:	(lastitution)	
will substitute this course/requirement:				(institution)	
Justification:					
WAIVER:					
Course/requirement requested to be waived:					
Justification:					
APPROVAL SIGNATURES					
Students must obtain signatures in the order listed	below.				
Department Chair Approval:					
1. DEPARTMENT CHAIR – PRINT NAME		Approve	d N	ot Approved	
DEPARTMENT CHAIR SIGNATURE	_		DAT	E	
(Registrar's Office use only)					
*Registrar Signature:			_ Date Pro	ocessed:	