

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 Catalog Year: _____

Major(s): 1: _____ 2(Optional): _____

Minors: 1: _____ 2: _____ 3: _____

Anticipated Graduation Date: FA 20____ SP 20____ SU 20____ WI 20____

REQUIREMENT SUBSTITUTION:

I request that this course/requirement: _____ taken at: _____
(Institution)

will substitute this course/requirement: _____ at The C of I.

Justification:

WAIVER:

Course/requirement requested to be waived: _____

Justification:

APPROVAL SIGNATURES

Students must obtain signatures in the order listed below.

Department Chair Approval:

1. _____ Approved _____ Not Approved _____
DEPARTMENT CHAIR – PRINT NAME

DEPARTMENT CHAIR SIGNATURE _____
DATE

(Registrar's Office use only)

***Registrar Signature:** _____ **Date Processed:** _____