PETITION FOR COURSE SUBSTITUTION OR WAIVER FORM



registrar@txwes.edu

I. STUDENT INFORMATION								
Ct. deat Nam				Student ID:				
Student Name:					Student ID:			
Current Major(s):					Anticipated Graduation Date: Month Year			
Current Minor(s): (If applicable)					Catalog Year:			
II. COURSE SUBSTITUTION (Replaces a required course in the degree audit, provided the course substitution meets the content of the required course)								
II. COOKSE SC		st course you want to petition to substitute		Mided til		dicate the required cou		
Course Number		Course Title urses, include the transfer institution name)	Taken		Applies To (Select an area)		Course Number	Course Title
(HIST-2301)	(For transfer cot	arses, include the transfer institution name)	Term	Year			(HIS-3322)	
					☐ GEC ☐ Major	☐ Related Req. ☐ Minor		
Valid justification for request:								
·	· –							
Indicate the <u>second</u> course you want to petition to substitute					Indicate the required course shown in the degree audit			
Course Number (For transfer co		Course Title urses, include the transfer institution name)	Tal Term	ken Year	Applies To (Select an area)		Course Number	Course Title
			reim	rear	☐ GEC ☐ Major	☐ Related Req. ☐ Minor		
	_		1		LI Wajor	L IVIIIO		
Valid justification for request:								
	_							
Indicate the <u>third</u> course you want to petition to substitute					Indicate the required course shown in the degree audit			
Course Number	Course Title (For transfer courses, include the transfer institution name)			cen	Applies To (Select an area)		Course Number	Course Title
- Trumber	(r.o. transier co.		Term	Year	GEC	☐ Related Req.	- Tumber	
					☐ Major	☐ Minor		
Valid justification for request:								
	_							
III. COURSE WAIVER (Exempts a required course in the degree audit from being taken. A student does not earn credits for a course that has been waived) Course Number on Degree Audit Course Title Applies To								
	5-3322)					(Select an area)		
				☐ GEC ☐ Major			☐ Related Req. ☐ Minor	
Valid instificati	f							
Valid justification for request:								
	_							
IV. APPROVA	L SIGNATURES							
If the course	substitution or wa	iver involves a General Education Curri						
	the request. If the is responsible for	e substitution or waiver does <u>not</u> involv approval.	ve a Gener	al Educat	ion Curriculum	n requirement, the d	ean in whose	school the student's
•	·							
Faculty Advisor Signature:					Date:			
Academic Advisor Signature:					Date:			
(Major) Dean Signature					Date:			
(Major) Dean Signature:				Date:				
(GEC) Dean Signature:				Date:				
					For Of	fice of Student Records	Use Only	
								ate: