Request for Substitution/Waiver

Legal Name: ___________________________  NUID: ___________________________
Email: _______________________________  Phone: ___________________________
Major: Criminology & Criminal Justice  Minor(s): ___________________________
Pre-Approval: [ ] (Check box for pre-approval of planned transfer course)

<table>
<thead>
<tr>
<th>Institution granting credit for course(s):</th>
<th>Department and Course #</th>
<th>Course Title</th>
<th>Credit Hours and Grade</th>
<th>Requirement Affected</th>
</tr>
</thead>
</table>

[ ] Request for substitution noted above.
Explanation and justification for request:

[ ] Request for waiver of following requirement:
Explanation and justification for request:

Department Recommendation
[ ] Approved  [ ] NOT Approved  Department Signature: ___________________________  Date: __________________
Comments:

ADVISING OFFICE USE ONLY
Final Decision:
[ ] Approved  [ ] NOT Approved  College Signature: ___________________________  Date: __________________
Comments: