

## Request for Waiver or Substitution of Course Requirement

**Student Information**

Student's Name \_\_\_\_\_ Gavilan ID# \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip

Home Phone (\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_) \_\_\_\_\_

Email address \_\_\_\_\_

Major \_\_\_\_\_ Semesters at Gavilan \_\_\_\_\_ Units Completed \_\_\_\_\_

**Course Information**

★ { I hereby request a waiver of  
 Gavilan course \_\_\_\_\_  
Discipline Number Course Title Units

Which is a requirement for  Degree Major  Certificate  Gavilan General Education  
**OR**

{ I wish to substitute this course \_\_\_\_\_  
Discipline Number Course Title Units

Taken at \_\_\_\_\_  
Name of Institution (Official transcript must be on file)

For this Gavilan Course \_\_\_\_\_

Which is a requirement for  Degree  Certificate  Gavilan Gen Ed  IGETC

**Rationale for Request**

(Be specific. If request is for a Waiver, explain how the course content and/or skill has been met or mastered. If substituting one course for another, explain how the course is an appropriate substitution. Attach an official transcript and course description if the course was taken at another institution.)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

**Action:**

Counselor \_\_\_\_\_ Date \_\_\_\_\_

Approved  Denied  Course Instructor \_\_\_\_\_ Date \_\_\_\_\_

Reason: \_\_\_\_\_

Department Chair \_\_\_\_\_ Date \_\_\_\_\_

Reason: \_\_\_\_\_

Area Dean \_\_\_\_\_ Date \_\_\_\_\_

Vice President of Instruction \_\_\_\_\_ Date \_\_\_\_\_

**REGARDLESS OF DISPOSITION, PLEASE RETURN TO ADMISSIONS AND RECORDS**