



REQUEST FOR SUBSTITUTION OR EXEMPTION
OF UNIVERSITY GENERAL EDUCATION REGULATION

This form must be accompanied by a copy of your transcript, your degree analysis if processed, and your latest course enrollment.

Student's Name / Social Security Number

Major / Degree sought / Date expected

Advisor's Name

Substitution or Exemption Requested:

REASON — (Explain why it is not possible or reasonable for you to complete the requirement — attach another sheet if more space is needed)

Do you plan to qualify for teacher certification? College hours completed:

Student's SIGNATURE / Date

Do not write below this line

ADVISOR'S RECOMMENATION: Yes No

Approve Disapprove SIGNATURE: Date

DEPARTMENT CHAIRPERSON'S RECOMMENDATION:

Approve Disapprove SIGNATURE: Date

ACTION: Approve Disapprove
Comments:

(Director of General Education, LAS 104)

Date

Registration Liberal Arts and Sciences 104 Advisor Student

