# Petition for Substitution/Waiver

**Instructions:** Take this form, along with supporting documentation, to the Department Chairperson.

## Student Information

<table>
<thead>
<tr>
<th>Name:</th>
<th>Student ID:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Last</td>
<td>First</td>
</tr>
<tr>
<td>Phone:</td>
<td>Email Address:</td>
</tr>
<tr>
<td>College:</td>
<td>Major:</td>
</tr>
</tbody>
</table>

| Term: | Fall | Spring | Summer | Year | 20 |

- [ ] I request to substitute ________ for ________
  - Dept/Course No. (i.e. NUTR 10)
  - College (i.e. Foothill College)
  - Units
  - Dept/Course No. (i.e. NUTR 10)
  - Units

- [ ] I request to waive ________
  - Dept/Course No. (i.e. NUTR 10)
  - Units

My reason for making this request is as follows:

I understand that a course substitution used to fulfill a specific Associate Degree/Certificate requirement must have been taken at an accredited institution (Official transcript must be on file at the District Admissions and Records Office). General Education requirements for Degrees cannot be waived.

| Student Signature: | Date: |

## Department/Discipline Action

- [ ] Substitution recommended. Units to be counted towards Associate Degree/Certificate.
- [ ] Waiver recommended. Units not to be counted towards Associate Degree/Certificate.
- [ ] Substitution/waiver denied. Reason:

  Dept. Chair Signature: Date:

## Division Action

- [ ] Substitution recommended. Units to be counted towards Associate Degree/Certificate.
- [ ] Waiver recommended. Units not to be counted towards Associate Degree/Certificate.
- [ ] Substitution/waiver denied. Reason:

  VP of Instruction Signature: Date:

## Office of Admissions and Records

- [ ] Request verified
- [ ] Request not verified

  Reason:

Processed by: Print Name Signature Date: 

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