Waiver of Course Request / Approval

Name of student _____   PID _____

Semester Accepted _____   MSTP   NSP   Advisor _____

Course to be Waived _____   Equivalent Course _____

Institution Taken At _____

Explain Reason for Waiver_____

GAC Decision: Approve   Deny

(check one)

GAC Representative Signature _____   Date _____

Student Signature _____   Date _____