



**COLLEGE OF  
MOUNT SAINT VINCENT**

**COURSE WAIVER/SUBSTITUTION FORM**

DATE: \_\_\_\_\_

ID: \_\_\_\_\_

STUDENT'S NAME: \_\_\_\_\_

CLASS: \_\_\_\_\_

**COMPLETE PART A OR B**

**PART A:**

TO HAVE THE FOLLOWING COURSE WAIVED:

MAJOR

CORE REQUIREMENT

DEPARTMENT	COURSE #	TITLE	CREDITS

\*A COURSE WAIVER/SUBSTITUTION IS NOT A WAIVER FOR CREDITS NEEDED TO GRADUATE. STUDENTS MUST FULLFILL ALL OF THE MINIMUM CREDIT REQUIREMENTS FOR THE AWARDING OF A DEGREE, THE COMPLETION OF A MAJOR, OR FULFILLMENT OF COURSE REQUIREMENTS.

**PART B:**

TO SUBSTITUTE:

MAJOR

CORE REQUIREMENT

DEPARTMENT	COURSE #	TITLE	CREDITS

**FOR:**

DEPARTMENT	COURSE #	TITLE	CREDITS

\_\_\_\_\_  
STUDENT'S SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
FACULTY ADVISOR'S SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
DEPARTMENT CHAIRPERSON'S SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
DEAN OF THE COLLEGE SIGNATURE

\_\_\_\_\_  
DATE

\*COMPLETE THIS FORM AND SUBMIT TO THE REGISTRAR'S OFFICE FOUNDERS HALL, ROOM 233