



Graduate Course Substitution or Waiver Approval Form

Please complete this form for any deviations from the stated coursework degree requirements.

Student Name: _____ DU ID Number: _____ Email: _____

Degree: _____ Department: _____

Course Substitution					
Substitution Course:			Apply Toward:		
Course Number (ex. ENGR 4000)	Course Title	Credit Hours	Course Number	Course Title	Credit Hours
<i>Rationale for substitution:</i>					
Substitution Course:			Apply Toward:		
Course Number (ex. ENGR 4000)	Course Title	Credit Hours	Course Number	Course Title	Credit Hours
<i>Rationale for substitution:</i>					
Substitution Course:			Apply Toward:		
Course Number (ex. ENGR 4000)	Course Title	Credit Hours	Course Number	Course Title	Credit Hours
<i>Rationale for substitution:</i>					

Course Waiver	
Please waive the following course(s):	_____
<i>Rationale for course waivers:</i>	

Additional Comments:

Signed: _____ Date: _____
Student Signature

Signed: _____ Date: _____
Advisor Signature

Signed: _____ Date: _____
Department Chair Signature