# 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

<table>
<thead>
<tr>
<th>Course Number (ex. ENGR 4000)</th>
<th>Course Title</th>
<th>Credit Hours</th>
<th>Apply Toward: Course Number</th>
<th>Course Title</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>

Rationale for substitution:

### Course Waiver

Please waive the following course(s):

Rationale for course waivers:

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Additional Comments:

___________________________________________________________________________________________

___________________________________________________________________________________________

Signed:  _____________________________________  Date:  ____________

Student Signature

Signed:  _____________________________________  Date:  ____________

Advisor Signature

Signed:  _____________________________________  Date:  ____________

Department Chair Signature

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Return this form to
Office of Graduate Education
Mary Reed Building, Room 5
2199 S. University Blvd. Denver, CO 80208
Phone 303-871-2706 | Fax 303-871-4942
gradservices@du.edu

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Graduate Course Substitution or Waiver Approval updated March 2018