

## **Return this form to Office of Graduate Studies**

Mary Reed Building, room 5 2199 S. University Blvd. Denver, CO 80208 Phone 303-871-2706 | Fax 303-871-4942 gradservices@du.edu

## 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	
Rationale for Substi	tution:					
	Substitution Course:			Apply Toward:		
Course Number (ex. ENGR 4000)	Course Title	Credit Hours	Course Number	Course Title	Credit Hours	
Rationale for Substi	tution:					
	<b>Substitution Course:</b>		Apply Toward:			
Course Number (ex. ENGR 4000)	Course Title	Credit Hours	Course Number	Course Title	Credit Hours	
Rationale for Substi	tution:					
		Cours	e Waiver			
Please waive the fol	llowing course(s):					
Rationale for waiving	ng above courses:					
Additional Commer	nts:					
Signed:	Student Signature		Date:			
Signed:	-		Date:			
	Advisor Signature		_			
Signed:	Department Chair Signature		Date:			