

Request to Waive Required Course

I, _____, UIN# _____
request authorization for the following required course(s) to be waived for the following reason (if
not enough room, please provide on attached sheet):

Course(s) to be waived:

- OCNG 608 OCNG 620 OCNG 630 OCNG 640
 Other: *(please specify)*

Reason for request:

Approval Recommended:

Chair

Student

Instructor(s) of Course to be Waived

Instructor(s) of Course to be Waived

Instructor(s) of Course to be Waived

Instructor(s) of Course to be Waived

Please return this form to the Academic Advisor in room 1203.