Petition to Waive a Course

Student Name ___________________________________________  Current Grade _____

Administrative approval is required to waive a course. Please complete this form and submit it to your Division Head.

1. Course to waive: ____________________________________________________________

2. Is this course a prerequisite? If so, for which course(s): ________________________________
   ____________________________________________________________

3. Reason (include description of experience, level of skill, participation in classes or programs outside of school):

   ____________________________________________________________

   ____________________________________________________________

   ____________________________________________________________

   ____________________________________________________________

Student Signature ___________________________________________  Date ____________

Parent Signature ___________________________________________  Date ____________

(if student is under 18)

Administrative Use Only  ☐ Approved  ☐ Declined

Division Head ______________________________________________  Date ____________

Vice President for Academic Affairs ___________________________  Date ____________

Revised 3/20/2013