

WAIVE A MAJOR REQUIREMENT

Please Print Clearly

Name	SWC ID:
Email:	Telephone : ()

SUBMIT TO THE APPROPRIATE SCHOOL OF YOUR MAJOR AFTER COMPLETING FORM.

Student: Attach an updated Student Educational Plan (SEP) prepared by a counselor for the current semester, if available. The results of your petition may be delayed if documentation is not provided.

You will be notified of the results by email.

I request permission to WAIVE _____
Course

This course is required to complete the following major.

Major Code & Title of your Major at Southwestern College

Reason for Submitted Petition

(State specific facts or circumstances to be considered by the Department Chair/Dean. If you have supporting documentation, please attach to petition.)

Student Signature _____ Date _____

RECOMMENDATIONS OF THE DEPARTMENT CHAIR/DEAN:

OFFICE USE ONLY

<input type="checkbox"/>	Approved
<input type="checkbox"/>	Denied
<input type="checkbox"/>	Need documentation
<input type="checkbox"/>	Counselor

Department Chair: _____

Date: _____

Dean: _____

Date: _____

****Instructional Administrator: Please return this petition to the Evaluations Office.**

Student Notified: _____

Initials

Date