



ITU

International Technological University

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www.itu.edu

Course Waiver and Substitution Request

Last Name, First Name Student ID #

Email Telephone #

Program _____ Concentration (if applicable) _____

<p>Who should use this form? Students should use this form to request to waive or substitute courses required in the program of study.</p>	<p>Where should I file this form? After obtaining the Department Chair's signature, please ask the Department Chair to submit the completed physical form to the Office of the Registrar.</p>
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Substitution

<u>ITU Courses to be Substituted</u> <i>Example. CEN 555</i>	<u>To Replace</u>	<u>ITU Courses (circle to indicate Core or Elective)</u> <i>Example. One SEN Elective Class (elective)</i>
	To Replace	(core / elective)
	To Replace	(core / elective)
	To Replace	(core / elective)

Waiver due to Prior Learning or Demonstrated Proficiency

Attention: Students are required to complete the total number of units required for the program, even if a requirement has been waived.

I request to waive the following course(s):

<u>Courses to be Waived</u>	<u>Comments from the Department Chair and/or Office of the Registrar</u>

Student Signature Date

Department Chair Signature Date

For Office Use Only	
Processed by _____	Date _____