Name: ____________________________________________________________________________________________

LoLA No: _________________________________________    Campus: ________________________________________

Program Major: _____________________________________________________________________________________

Signature of Requesting Student: _______________________________________________________________________

(FORE OFFICE USE ONLY)

<table>
<thead>
<tr>
<th>Course(s) Taken</th>
<th>College</th>
<th>Grade</th>
<th>Transfer Credit Accepted</th>
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<tbody>
<tr>
<td>Course Number/Title</td>
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(COURSE WAIVER)

The following course, _____________________________________, will be waived due to extenuating circumstances, e.g. course no longer required, course no longer offered, course content embedded in another course, etc. (Justify Below)

JUSTIFICATION

Caution: The required number of total credit hours for a program exit must be earned to receive a credential.

APPROVAL:

___________________________________________________________
Signature of Registrar

________________________
Date

OFFICE USE: Student Records

OFFICIAL TRANSCRIPT
ON FILE

Initials    Date Rec’d