Petition for Course Substitution or Waiver

NOTE TO CAMPUS: If you receive this petition, complete SECTION C and submit to the Office of the Registrar.

- Form should be typed or printed neatly in ink.
- Student will receive e-mail notification of final decision.
- This form may also be used to petition for a course substitution based on a documented disability. After completion of section A, student should submit this form to the campus SAIL office.

SECTION A: Student complete this section. Submit to: Office of the Registrar, 1519 Clearlake Rd., CO 2-202, Cocoa, FL 32922

Step 1. Provide Your Information

Student Name: (Print Legibly) ID# __________

EFSC Email: ___________________________________________ Daytime Phone: ________________________

Program Name: __________________________________________

Anticipated graduation date in this program __________________________________________

Step 2. Identify whether you are requesting a course substitution or course waiver.

(Note: this form is used for the purpose of substituting or waiving a course for degree completion only. It is not a request to waive a course prerequisite for registration purposes.)

☐ COURSE SUBSTITUTION
Indicates student has taken a course that meets the content and/or spirit of a required course in the student’s program. An approved substitution will not appear on the student’s transcript, but will satisfy the requirement for graduation. Course used for substitution must have been completed with a minimum grade of “C”. A substitution applies only to the program for which it is approved.

<table>
<thead>
<tr>
<th>Substitute this course: (prefix, number, title)</th>
<th>Credits</th>
<th>For the following required course: (prefix, number, title)</th>
<th>Credits</th>
<th>Course taken at: (name of institution)</th>
</tr>
</thead>
<tbody>
<tr>
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</table>

Attach documentation to support the petition for course substitution (e.g. course description or syllabus).

☐ COURSE WAIVER
Indicates student has successfully attained learning outcomes of course petitioned for waiver through demonstrated knowledge and/or skills not reflected on a transcript from another institution. An approved waiver is not reflected on the student’s official transcript and academic credit is not awarded. The waiver will satisfy the requirement for graduation, but the student may be required to complete coursework to account for outstanding credit hours required in the program. A waiver applies only to the program for which it is approved.

Attach documentation to support the course waiver. Briefly explain below how course learning outcomes have been attained.

Course requested for waiver: __________________________________________

<table>
<thead>
<tr>
<th>Prefix</th>
<th>Number</th>
<th>Title</th>
</tr>
</thead>
<tbody>
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</table>

Rationale for Waiver: __________________________________________

____________________________________________________________________________________________________

____________________________________________________________________________________________________

Student Signature __________________________________________ Date __________

SC-020 R020917
SECTION B: Office of the Registrar Complete This Section

EFSC Procedures as well as the student’s curriculum, catalog year and educational or career goals were considered in rendering this decision.

☐ The Office of the Registrar has reviewed and approved the student’s request. It is compliant with EFSC procedures and will not compromise the integrity of the student’s program.

☐ The Office of the Registrar has reviewed the student’s request and does not believe it warrants further consideration. A brief explanation for this decision is below.

☐ The Office of the Registrar has reviewed the student’s request and forwarded to the following for further consideration:
  Cluster or Program Chair/Manager: ____________________________ Date: ______________
  Campus Provost: ____________________________ Date: ______________

Sent From: ___________________________________________ Phone: ________________________

Office of the Registrar

SECTION C: Cluster/Program/Department Chair/Manager and/or Provost complete this section

☐ I have reviewed the student’s petition and approve the request.

☐ I have reviewed the student’s petition and deny the request based on the following reason(s):
  ☐ The course petitioned to use as substitution is not considered a general education course.
  ☐ The course requested as substitution does not meet the learning objectives of the EFSC course.
  ☐ The course petitioned for substitution or waiver is a critical course in the student’s program.
  ☐ Other: ____________________________

Please print name legibly and initial beside name.

Department ____________________________ Date ____________________________

☐ Recommendation Approved ☐ Recommendation Denied

Provost ____________________________ Date ____________________________

Comments: __________________________________________________________________________

Upon completion of Section C, please send completed form to the Office of the Registrar via college mail to Office of the Registrar CO-002 room 220, fax to 321-433-7172, or email to sender (See Section B.)

Office of Student Accessibility Services

A committee was convened to consider this request on date: ______________

Request was ☐ Approved ☐ Denied Signature: ____________________________

Executive Director, Student Accessibility Services

SECTION D: Office of the Registrar Complete This Section

☐ Request has been processed, noted in SPACMNT, student notified, and copy scanned into student’s record.

Processed by: ____________________________ Date: ____________________________