

VALENCIA COMMUNITY COLLEGE COURSE SUBSTITUTION/WAIVER REQUEST FORM

I. Student Information

Student Name: _____

Student ID: _____

II. Program Information

_____ Catalog Year

_____ AA Degree (Specify Pre-Major, if Applicable) _____

_____ AS Degree Specialization: _____

_____ Technical Certificate Specialization: _____

III. Course Substitution/Waiver

Requirement (course required in program of study):

Subject (Prefix): _____ Course (Number): _____

Substitution (Course student has completed)

Subject (Prefix): _____ Course (Number): _____

Institution where taken: _____

FOR ADMISSIONS/ RECORDS USE ONLY:
Attribute: _____
Attribute: _____
Area to be Substituted: _____

Course Substitution (Please indicate the reason for the course substitution)

Course Waiver: Please list the course(s) in the box below completed at another institution which generated fewer credit hours than the Valencia equivalent course. The total number of semester hours specified in the Valencia Catalog will still be required for the student to graduate.

Course	Institution	Credit Hrs.

IV. Approval (Please sign indicating approval of the changes noted above)

If approved, this form should be sent to the Admissions and Records District Office

Academic Dean (Based on the campus dept. responsible for the course program*)

Date

***General Education courses are reviewed by an academic dean responsible for that course. AS/AAS courses are reviewed by an academic dean responsible for that program.**