

School of Architecture & Planning

Request Form for Course Waiver, Transfer and Substitution

For use by Graduate Students who wish to petition the Architecture/Planning program to waive a required course, to allow transfer of credit from other institutions or to substitute a non-required course or experience for a required course. When completed and approved this form is placed in the student's file.

STUDENT PROCEDURE: Fill out Section I of this form, obtain the required information and signatures and submit the form to the Graduate Advisor who will then obtain the signature of the Director of the appropriate academic program.

Section I: I, *(student name)* _____ wish to

Check one: *waive* *transfer* *substitute the following course(s).*

My Degree Program is: M.Arch MCRP MLA Certificate Program _____

Year matriculated _____

Local telephone number: _____

Local Mailing address: _____

On the following lines, please list the course(s) under consideration and the unit credit. If you are requesting a transfer, please attach your college transcript, and if possible, the course outline(s). It must have been a graduate level course in which you earned a "B" or better. For substitution of a problems credit course for regular courses, list the faculty person who has agreed to offer you the Problems course.

Course # 1 _____

Course # 2 _____

Course # 3 _____

Please list the reasons why you are making the request.

Course # 1 _____

Course # 2 _____

Course # 3 _____

Now, take this form to the faculty member(s) who normally teach the course(s). The student advisor or your faculty advisor can help identify these people for you. Have the faculty member who normally teaches the course fill in Section II, and then submit to the Graduate Advisor, who will obtain the program director's signature.

****FACULTY MEMBERS TURN FORM OVER AND FILL IN SECTION II****

FACULTY PROCEDURE: The student listed in Section I is requesting approval of the checked action. The student has listed a course, which you normally teach, and has provided a rationale and supporting materials for this request. Please review the request and state below your approval or disapproval. Should you need additional supporting materials (documentation, work or other) request the student to provide them.

If there are other courses listed in Section I that require action of other faculty members, please forward this form to the next faculty person. On questions of procedure, you may ask the Graduate Advisor or Program Director.

Please act on this request within 10 days.

SECTION II:

Course # 1 I, (Name/Rank) _____, recommend to
____ Approve ___ Do not approve Other _____
the student's request for course _____.
Comments: _____
SIGNED: _____

***If your action is the last one, please send this form to the Graduate Advisor. Thank you.*

Course # 2 I, (Name/Rank) _____, recommend to
____ Approve ___ Do not approve Other _____
the student's request for course _____.
Comments: _____
SIGNED: _____

***If your action is the last one, please send this form to the Graduate Advisor. Thank you*

Course # 3 I, (Name/Rank) _____, recommend to
____ Approve ___ Do not approve Other _____
the student's request for course _____.
Comments: _____
SIGNED: _____

***If your action is the last one, please send this form to the Graduate Advisor. Thank you*

SECTION III: Program Director: After reviewing the requests and recommendations of the faculty, the Director has taken the following actions(s).

____ Approve Request in full _____
____ Approve certain courses as follows _____
____ Do not approve the request _____
Comments: _____

SIGNED BY DIRECTOR _____ DATE _____

****WHEN COMPLETED AND SIGNED BY DIRECTOR FORM IS PLACED IN STUDENT FILE.****