BEAR DEN AUDIT WAIVER/SUBSTITUTION FORM

Student Name: _____

Student P-ID: _____

Department: _____

Exception is for:

Major Title: _____ **Banner Code:** _____

Minor Title:_____ **Banner Code:** _____

Concentration:_____ **Banner Code:** _____

Description of Waiver or Substitution to be Coded:
(Please be specific as to which requirement this pertains to, such as "Allow BIOL 223 taken in the Spring 2008 semester to count as a free Biology Department elective" or "Allow PSY 200 taken at JCC to count as a Group I requirement")

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

Advisor Signature: _____ **Date:**_____

Chair/Coordinator Signature: _____

Date: _____ **Chair Phone Number:** _____

Chair Email Address: _____