

WAIVE A MAJOR REQUIREMENT

Please Print Clearly

Name	SWC ID:
Email:	Telephone : ()

SUBMIT TO THE APPROPRIATE SCHOOL OF YOUR MAJOR AFTER COMPLETING FORM.

Student: Attach an updated Student Educational Plan (SEP) prepared by a counselor for the current semester, if available. The results of your petition may be delayed if documentation is not provided.

You will be notified of the results by email.

I request permission to WAIVE _____
Course

This course is required to complete the following major.

Title of your Major at Southwestern College

Reason for Submitted Petition

(State specific facts or circumstances to be considered by the Department Chair/Dean. If you have supporting documentation, please attach to petition.)

Student Signature _____ Date _____

RECOMMENDATIONS OF THE DEPARTMENT CHAIR/DEAN:

OFFICE USE ONLY

<input type="checkbox"/>	Approved
<input type="checkbox"/>	Denied
<input type="checkbox"/>	Need documentation
<input type="checkbox"/>	Counselor

Department Chair: _____

Date: _____

Dean: _____

Date: _____

****Instructional Administrator: Please return this petition to the Evaluations Office.**

Student Notified: _____

Initials

Date