

THE PENNSYLVANIA STATE UNIVERSITY  
Eberly College of Science

PETITION FOR COURSE SUBSTITUTION/EXEMPTION/WAIVER

**INSTRUCTIONS:** Please consult your advisor in preparing this form. After this form has been reviewed and signed by your advisor and program chairperson, submit it to the Associate Dean's Office, 428 Thomas Building, for final processing. A copy of your petition will be returned to you by mail after action has been taken.

Student's Name: \_\_\_\_\_ PSU ID# \_\_\_\_\_

Major: \_\_\_\_\_ Option: \_\_\_\_\_ Semester Standing: \_\_\_\_\_

Local Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

\_\_\_\_\_ E-Mail: \_\_\_\_\_



Course Substitution

Exemption/Waiver

Other

Petition:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Detailed Explanation: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_



Recommendation: \_\_\_\_\_ Recommendation: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Recommend  Do not recommend

Recommend  Do not recommend

\_\_\_\_\_  
Advisor Signature

\_\_\_\_\_  
Department/School Authorized Signature

Comments: \_\_\_\_\_

Approved

Denied

\_\_\_\_\_  
Signature, Associate Dean/Authorized Representative