

Date received:

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Major/Minor Requirement Substitution Waiver Form

Student's Name:		Banner ID #:	
Email:	@wm.edu	Anticipated Graduation Date:	
Major/Minor:			
I am requesting a substitution to the major o	or minor requirement indicate	d below:	
Required Course:	Proposed S	Proposed Substitute Course:	
Course Prefix and Number	Course Prefix and Number (as it appears on my record)		
Course Title	Course Title		
Number of Credits	Number of Credits		
I am requesting an exemption/waiver of the		indicated below:	
Explain the reason for the request.			
		Date:	
Student's Signature			
Chair/Program Director for Major/Minor:	Printed Name		
Chair/Program Director's Signature:			
FOR OFFICE USE ONLY			