



Office of the Registrar
PETITION FOR SUBSTITUTION AND/OR WAIVER OF DEGREE REQUIREMENTS

STUDENT INFORMATION

Name: _____ GU ID#: _____
Last First M.I.

E-mail: _____ Phone#: _____ Cell Home

Have you applied to graduate? Yes No If yes, when graduating: May June Aug Dec Year: _____

Select Declared School of Study: ART & SCI BUSN EDUC ENGR NURS & HPHY LDRS

- I understand that:
- 1) Substitution means that the substituted course fulfills only the specified requirement.
 - 2) Substitutions and waivers are not effective until they are on file in the Registrar's Office.
 - 3) Waiver of a course does not absolve a student from fulfilling the required hours for graduation.

Student Signature: _____ Date: _____

SUBSTITUTION INFORMATION

A) In place of Gonzaga's required _____
 substitute _____ from _____
(College or University)
 because _____

B) In place of Gonzaga's required _____
 substitute _____ from _____
(College or University)
 because _____

WAIVER INFORMATION

C) Waive _____ because _____

D) Waive _____ because _____

UNIVERSITY OFFICIALS APPROVALS

1. _____
 Advisor (*Honors Director if student is in the Honors Program*)

2. Department Chairs of Substituted/Waived Courses

A) _____ B) _____
 C) _____ D) _____

3. Dean of Substituted/Waived Courses

a) _____ Date: _____
 b) _____ Date: _____