

## WAIVER OF DEGREE REQUIREMENT FORM

To request to waive a degree requirement, please fill out the following information, obtain the signature of the instructor of the waived course and your Department Chair (\*check with your department if approvals are needed from both). Then return form to the Office of Student Services via email at <a href="mailto:des-studentservices@design.upenn.edu">des-studentservices@design.upenn.edu</a>.

Please review the full <a href="mailto:waiving and substituting courses policy">waiving and substituting courses policy</a> before completing this form.

Student Information (please print	t clearly)	
Date:		Term:
Full Name:		PennID:
Program(s):		
Email Address:		
Waived Course Information		
Course Code:	(ex: ARCH-5010-001)	
Course Title:		
Term in which course would have	ve been taken:	
Please select the relevant CU re your department.	placement requirement belo	w. If you are unsure, check with
Waived course can be replaced with any graduate-level elective in the department.		
Waived course can be re	eplaced with any graduate-leve	I course.
Department requires waived course to be replaced with specific course.		
(add course information below)		
Replacement Course Informati	ion (only fill out if you selected th	e last option above)
Course Code:		
Course Title:		
Term in which replacement cour	rse will be taken:	
Student Name (Please Print)	Student Signature	Date
Approvals:		
		Data
Instructor of Waived Course Name sign *If required by your department	nature or email approval	Date
Dan orthograf Chair or Drograms Director	Name signatura ar angil sususus	Date
Department Chair or Program Director *If required by your department	ivame signature or email approval	Date