Current Degree Select One:				Email: Current Minor(s):				
Course Substitution								
Course Number (ex. HIST 2000)	Course Title	Credit Hours	Apply Toward: Common Curriculum	(Select an	area and	Other (list area)	equivalent cours Course Number	re number and title , if known .) Title
Course Waiver								
Please waive the following course(s)/requirement(s):								
Additional Comments:								
This form may be submitted via campus mail or by DU email (Deans, Faculty send it as an attachment , and Advisers only). If you are submitting this form via email please type your name on the signature line and send it as an attachment								
	-						D	ate:
Send the completed form via email to registrar@du.edu or directly to the student's Registrar Advisor. Questions about this policy and procedure may be directed to the Office of the Registrar at 303.871.4 095.								
Registrar Office Use Only: Date Received: Received by: Mail DU Email Processed By: Date Processed:								