



Substitutions & Waivers

(UNDERGRADUATE DEGREE PROGRAMS)

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Missouri University of Science and Technology
Office of the Registrar

Name _____ Student ID _____

Address _____ Date _____

Major _____ Anticipated Term of Graduation _____

Degree _____ Requirement Term _____

THE FOLLOWING EXCEPTIONS ARE ONLY VALID FOR THE MAJOR SHOWN ABOVE

_____ COURSE SUBSTITUTION FOR A REQUIRED COURSE (SIMILAR ACADEMIC CONTENT)

Course Taken			Course Required		
Use _____	_____	_____	For _____	_____	_____
Use _____	_____	_____	For _____	_____	_____
<small>SUBJECT</small>	<small>CATALOG NBR</small>	<small>HRS</small>	<small>SUBJECT</small>	<small>CATALOG NBR</small>	<small>HRS</small>

Semester(s)/Year(s) taken _____

Degree Audit Location: Requirement _____ Sub-Requirement _____

Explain how to maintain total degree hours if the required course has greater credit hour value.

_____ COURSE SUBSTITUTION IN AN ELECTIVE AREA

Use the Course _____ For _____ In Req _____ Sub Req _____

Use the Course _____	_____	For _____	In Req _____	Sub Req _____
<small>SUBJECT</small>	<small>CATALOG NBR</small>	<small>REQ/SUB REQ TITLE</small>		

_____ WAIVERS (NOT TO INCLUDE TOTAL DEGREE HOURS OR GPA REQUIREMENTS)

Waive _____ Requirement _____ Sub Requirement _____

Example: Waive (The Foreign Language Requirement)

Specify how to maintain total degree hours:

_____ OTHER (SPECIFY) _____

_____ JUSTIFICATION:

Advisor Approval: _____ Date: _____

_____ Approved	Department Chair: _____	Date: _____
_____ Denied		

Denied requests may be appealed to the Vice Provost and Dean.

Copies to: White – Registrar Yellow – Department Email – Student