

UNIVERSITY OF DAYTON SCHOOL OF ENGINEERING	REQUEST TO WAIVE A COURSE
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This form is used by a department chairperson to recommend that a course be waived. The decision on the request will be emailed to the student. The student may view the change on the Webadvisor website.

UD ID: _____ Major: _____

<i>Last Name</i>		<i>First Name</i>	
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COURSE (CODE AND NUMBER) _____

COURSE TITLE: _____

Please explain why this recommendation is being made.

Signature of Chairperson *Date*

I approve this request.
 I do not approve this request.

Assistant Dean's Comments:

Assistant Dean's Signature *Date*

Please forward this form to the Office of the Dean of Engineering, KL-266, Zip +0228.