



## COURSE SUBSTITUTION/WAIVER

**Office of the Registrar**  
**Lincoln Hall, First Floor**  
**CPO 2168**  
**Berea, KY 40404**  
**859-985-3185**  
**859-985-3918 (fax)**  
**Registrar@berea.edu**

Requests for substitutions or waivers of degree requirements must be initiated by the Academic Advisor. Submission of the request via email is acceptable as long as it follows the format below. The request is then forwarded to the Department Chair. If the Department Chair supports the request, s/he will indicate support in an e-mail and forward the request to the Division Chair. If the Division Chair approves the request, s/he will indicate such in an e-mail that will be forwarded to the Associate Registrar ([kathy\\_wallace@berea.edu](mailto:kathy_wallace@berea.edu)).

Student's Name

Student's ID Number

Advisor's Name

Major/Minor in which substitution is requested

Original course requirement (Course number and title)

Course to be substituted (Course number and title)

Rational or explanation for how substitution meets original requirement

Rational or explanation for student not meeting degree requirement (if requirement is being waived)