

WAGNER COLLEGE

OFFICE OF THE REGISTRAR

Waiver and Substitution

(Please print)

DATE: _____

ID#: _____

NAME: _____

MAJOR: _____

How best to get in touch with student: _____

Course #	Course Waived	Units	Course #	Course Substituted	Units	What for? Major/Gen Ed/Area

Comments:

Signature: Department Chairperson

Date

.....
Date Received: _____

Date Sent to Student: _____

Registrar/2016 Forms/2016_Waiver and Substitution