UNIVERSITY OF HARTFORD

Adjustment of Degree Requirements Form

Waiver of Requirements OR Substitution

Student Name				College			
			-	Degree			
ID	Matriculation Date			<u>Major</u>			
			-	Minor			
University En	mail Address						
Waiver							
			-OR-				
Substitution	Their Course Code	Their Course Number	FOR	Our Course Code	Our Course Number	Our # of Credits	
	Their # of Credits	Their Term Taken		Programmatic Requir	ement		
Explanation	(required):						
Student Sig				Date:			
			Signa	Signature:		Date:	
	Advisor:						
	Dept Chair:						
Dear	n or Designee:						
Entered F				y:	Da	te:	