

UNIVERSITY OF HARTFORD

Adjustment of Degree Requirements Form

Waiver of Requirements OR Substitution

Student Name:

College:

Degree:

ID:

Matriculation Date:

Major:

Minor:

University Email Address:

— WAIVER —

Explanation for course waiver (required):

Course Code for Waiver

Course Number for Waiver

Credit Count for Waiver

— SUBSTITUTION —

FOR

Course Code for Course Taken

Course Number for Course Taken

Credit Count for Course Taken

Term and year for Course Taken

Course Code at UHart

Course Number at UHart

Credit Count at UHart

Programmatic Requirement

Explanation for course substitution (required):

Signatures 

Dates 

Student:

Advisor:

Dept Chair:

Dean or Designee:

Entered By:

Date: