



**College of Arts and Sciences
Petition for Waiver of Academic Regulation**

Used to request an exemption from a deadline or regulation where exceptional circumstances make compliance impossible (such exemptions are rarely given). Instructor or advisor support is required for all requests. Complete front and back of form. Late change of program fee—during semester, \$40, after close of semester, \$90.

***Incomplete forms will not be processed**

Print Name (Last, First, M.I.) _____ **Student ID #** _____ **Date** _____

LATE ADD / DROP REQUEST	For adding or dropping a course after the deadline. If course is from a prior term, enter that term. Instructor signature required.	Office Use
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Check one		Course information						Final grade (prior term)	Instructor Signature	Approved?	
Add	Drop	Dept	Number	Sect	Credits	Grade Opt	Term (sem/yr)			Y	N
						NU CN					
						NU CN					
						NU CN					
						NU CN					

LATE CHANGE TO EXISTING GRADE OPTION OR CREDITS

Note: LAF courses require numeric grade. For change to grade scheme or number of credits (credit change usually for music courses)

Dept	Number	Sect	Credit	Grade Opt	Instructor name	Instructor Signature	Approved?	
			Change (from/to)	Change to:			Y	N
				NU CN				
				NU CN				

INDIVIDUALIZED STUDY REQUEST When taking more than one IDS in a term or when taking a catalog course as IDS

More than one in a term Take catalog course as ID!

Catalog course? Y/N	Dept	Number	Sect	Credits	Term (sem/yr)	Instructor Signature	Approved?	
							Y	N

SUBSTITUTION OR WAIVER OF LAF To use a non-LAF course, transfer course or experiential learning to fulfill an LAF. Must be accompanied by detailed explanation of how LAF learning outcomes were met.

Course	Dept	Number	Sect	Credits	LAF requested	Instructor signature on reverse	Approved?	
								Y

WAIVER OF RESIDENCE REQUIREMENT- FINAL 32 CREDITS. To request a waiver to requirement for completion of final 32 credits of degree in residence at Redlands.

Enter proposed outside institution courses, attach transfer approval request for the courses.							Approved?	
Course(s)	Dept	Number	Sect	Credits	Outside institution	Y	N	

OTHER REQUEST-PLEASE PRINT LEGIBLY Specify your request. Attach explanation if more space is needed.

							Approved?	
							Y	N

Office use only:
 Dean/Registrar signature: _____ Date: _____
 Comments: _____

