**REQUEST FOR COURSE WAIVER/SUBSTITUTION**

**STEP I:** TO BE COMPLETED BY THE STUDENT (Please print):

1) Name
   - Last
   - First
   - M
   - UH ID/Username:

2) Major: ____________
   - AA
   - AAS
   - AS
   - CA
   - COC
   - Degree:

3) I hereby request permission to be waived from taking:
   - Course Alpha: ____________
   - Course No.: ____________
   - Course Title: ____________
   - Credits: ____________
   - and to substitute one or more of the following:
     - Course Alpha: ____________
     - Course No.: ____________
     - Course Title: ____________
     - Credits: ____________
     - a)
     - b)

4) □ I have completed the above course(s) at HawCC.
   □ I am currently enrolled in the above course(s) at HawCC.
   □ I am requesting that the course be transferred from ____________
   - Semester
   - Quarter system
   (choose one)

*Please have course description(s) & transcript attached if not HawCC Course.

<table>
<thead>
<tr>
<th>Print Name</th>
<th>Student’s Signature</th>
<th>Date</th>
</tr>
</thead>
</table>

**STEP II: TO BE COMPLETED BY THE PROGRAM ADVISOR (Student's Major):**

I recommend that the above student's request be:

□ approved □ denied

Reason:

<table>
<thead>
<tr>
<th>Print Name</th>
<th>Program Advisor’s (student’s major) Signature</th>
<th>Date</th>
</tr>
</thead>
</table>

**STEP III: TO BE COMPLETED BY THE DIVISION CHAIR (Student's Major):**

I recommend that the above student's request be:

□ approved □ denied

Reason(s):

<table>
<thead>
<tr>
<th>Division Chair's Signature</th>
<th>Printed Name</th>
<th>Date</th>
</tr>
</thead>
</table>

**STEP IV: TO BE COMPLETED BY THE VICE CHANCELLOR FOR ACADEMIC AFFAIRS:**

I recommend that the above student's request be:

□ approved □ denied

Reason(s):

<table>
<thead>
<tr>
<th>Signature &amp; Printed Name</th>
<th>Date</th>
</tr>
</thead>
</table>

**STEP VI: SUBMITTED TO THE ADMISSIONS & RECORDS OFFICE (for office use only):**

ACTION TAKEN: □ Request was not approved
   □ Waiver/substitution noted on student's record Date/Initials processed: ____________
   □ Transcript evaluation completed and transfer credits accepted/articulated Date/initials sent: ____________
   □ Other (specify): ____________

COPIES SENT: □ VCAA
   □ Student
   □ Advisor

Date/initials sent: ____________

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