



Office of the Registrar
 4400 University Drive, MS 3D1, Fairfax, Virginia 22030
 Tel: 703-993-2441 Fax: 703-993-4032

SUBSTITUTION/ WAIVER FORM

DEGREE

Name: _____ Mason Email: _____ G#: _____
Last First

Day Phone: _____ Major: _____ Catalog Year: _____ Date: _____

For Mason and transfer courses for which a direct equivalency has been denied. A lower level class substituted for an upper level class does not fulfill upper level credit requirements. Check your degree evaluation on Patriot Web to see if this request has been approved and processed.

Note: Students should attach a course description for transfer courses.

SUBSTITUTIONS (Course content of two courses is not equal, but substituting course may be used to meet the requirement.

University General Education requirements that are being substituted by a Mason Course require Associate Provost approval.)

<u>Course on my Patriot Web transcript:</u>				<u>How I want it to count:</u>
<small>*Institution Name Term Taken</small>	<small>Subject & Course Number</small>	<small>Credits</small>	<small>Grade</small>	<small>Major <input type="checkbox"/> Minor <input type="checkbox"/> University General Ed* <input type="checkbox"/> requirement to be substituted</small>

WAIVERS (Waivers for University General Education require Associate Provost approval after the department and dean. Waivers apply to degree requirements and do not waive credit hour requirements.)

<u>For this reason:</u> <small>(describe and attach any supporting documentation)</small>	<u>Waive this course or requirement:</u>
	<small>Major <input type="checkbox"/> College <input type="checkbox"/> University General Ed* <input type="checkbox"/></small>

APPROVAL

	Signature	Date	Approved	Denied	Comments
Student's Major (or Minor) Department					
Student's Dean					
*Associate Provost <small>(for University General Ed Waivers & University General Ed Substitutions using a Mason Course)</small>					

Submit Completed Form to Registrar's Office, MS 3D1, or fax to (703) 993-4032

Office of the Registrar Use Only

_____ Update record if approved Initials _____ Date _____