

Academic Policy Exception Request

VU Box Number:Phone:		
	E-mail	Major
() FRESHMAN () SOPHOMOR	e () junior () senio	R () GRAD STUDENT
Type of exception: () Substitution	() Waive Requirement (Academic Petition
For Substitution, please comp	lete the following:	
VU requirement	; Substitute with_	
Take	en from	(school)
during(year/	term).	
For Waiver of Requirement, p	olease complete the follow	ving:
VU course to be waived:		
Explanation: (Attach additional page if more room is ne	eeded)	
To Petition for exception to a	cademic policy or file a gr	rade appeal indicate below:
[] Course Issue [] Add/Drop []	Catalog Issue [] Transfer [] (- -
nclude the following:		Core requirement* [] Grade:
[] Course Issue [] Add/Drop [] Include the following: Dept & Course Number: Briefly state your request below. Plestatements made in your request, if	Instructor:ease attach supporting docume	Core requirement* [] Grade:Semester/Year
nclude the following: Dept & Course Number: Briefly state your request below. Ple statements made in your request, if	Instructor:ease attach supporting docume applicable.	Core requirement* [] Grade: Semester/Year ntation, including records to verify
Include the following: Dept & Course Number: Briefly state your request below. Ple	Instructor:ease attach supporting docume applicable. Department Chair:*CORE Chair:	Core requirement* [] Grade: Semester/Year ntation, including records to verify DateDate
Include the following: Dept & Course Number: Briefly state your request below. Plestatements made in your request, if Recommend to [] Approve [] Deny: Recommend to [] Approve [] Deny:	Instructor:ease attach supporting docume applicable. Department Chair:*CORE Chair:	Core requirement* [] Grade: Semester/Year ntation, including records to verify DateDateDateDate