



Petition to Substitute/Waive Courses for Graduation Requirements

Please fill out this form and submit it: by fax to: (908) 689-5824 or by mail to:
Registrar, Warren County Community College, 475 Route 57 West, Washington, NJ 07882

Contact Information

Student ID number: _____ Major: _____

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: (_____) _____ - _____

E-mail: _____

You must list a specific course name and code in each category, not an elective category. For courses which have been approved as transfer credit, please list the WCCC course code assigned to the course.

Please consider: _____
course you have taken or are currently taking (example: CSC-103 Introduction to Computing)

Is this a WCCC course? Yes No (If no, at what college was it taken? _____*)
**substitutions for courses taken at other institutions require that an official transcript have been submitted to WCCC and evaluated for transfer credit. Please list the course for which transfer credit was assigned.*

to fulfill the requirement of: _____
course required for your degree (example: CSC-112 Computer Software Applications)

Please provide a detailed rationale for your request:

If necessary, continue on back of this page

Student Signature: _____ Date: _____

Type your full name, or print this document and apply your signature to the above line.

Rationale (continued, if necessary):

Advisor Notes: _____

Advisor Signature: _____ Date: _____

FOR OFFICE USE ONLY:

Approved **Not Approved**

Registrar: _____ **Date:** _____

Comments: _____
