The Rubenstein School of Environment and Natural Resources

Request for Course Substitution or Waiver Form
Forestry Program

Please Print Or Write Clearly

Name: ______________________________________ ID #: ________________________________

Class: ______________________ Telephone Number: __________________________________

E-Mail Address: ______________________ Advisor: _________________________________

Nature of Request (include numbers and titles of course(s) involved and specific reasons for request).

Signature: ______________________________ Date: _________________________________

Advisor: ______________________ Approve: _____ Disapprove: _____ Date: _____________

Comments: _____________________________________________________________________

Faculty (* if any): ______________________ Approve: _____ Disapprove: _____ Date: __________

Comments: _____________________________________________________________________

Program Chair: ______________________ Approve: _____ Disapprove: _____ Date: __________

Comments: _____________________________________________________________________

Dean: ______________________ Approve: _____ Disapprove: _____ Date: _________________

* Proposals requiring a waiver of any forestry curriculum requirement or those involving substitutions of
required professional forestry courses require forestry faculty approval.