

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.*