

DARS EXCEPTION FORM

Request for course substitutions or waiver. Exceptions will be processed within 10 working days.

Exception For: (check box)
Major
Minor
Certificate

Name:	ID:	Date:		
Catalog Year:	Degree Program: _			
NOTE: If you believe a transfer r	ule is incorrect and should be ch	anged for all students, please contact the RO	719-549-2261, no form is needed.	
COURSE SUBSTITUTIO)N			
(Used to replace required course with another course)		Transfer Institution:	Comments:	
1. Substitute	with			
Required Cou	rse Substituted Cour	se		
2. Substitute	with Substituted Course)		
			_	
3. Substitute Required Cou	urse Substituted Cour	se		
4. Substitute Required Cou				
Required Cou	rse Substituted Cour	se		
REQUIREMENT SUBSTITE (Used to satisfy program require		Transfer Institution:	Comments:	
5. Substitute				
Catalog Requ	irement Substitution			
6. Substitute	with		_	
	irement Substitution	-		
7. Substitute	with Substitution			
8. Substitute	with			
Catalog Requ	irement Substitution			
COURSE, REQUIREMEN	NT OR GRADE WAIVER	nt within a Major Requirement)		
Course Prefix & Number or Re				
Course From the France of Fra	Administration (1997)			
Major change requires:			0.251	
Major Advisor Signature		Dept. Chair Signature	Dept. Chair Signature for Major	
Minor change requires:		<u></u>		
Mi	nor Advisor Signature	Dept. Chair Signature	e for Minor	
Certificate change requires:				
(Certificate Advisor Signature	Dept. Chair Signature	Dept. Chair Signature for Certificate	