



SUBSTITUTION/WAIVER PETITION OF GRADUATION REQUIREMENTS

Instructions for Completing this Petition*

**If you are requesting a disability-related accommodation for course substitution/waiver, contact Disabled Student Programs & Services (DSPS) for consultation. To schedule an appointment to meet with a DSPS Specialist, please call (805) 730-4164 or visit SS-160.*

1. Complete Step 1 of the petition. If substituting coursework from another college, **official** transcripts must be on file at SBCC.
2. Review the petition with an SBCC Academic Counselor to verify your catalog rights for the program requirements for which a substitution or waiver is being requested.
Note: Counselor verification of catalog rights is not an inferred or explicit endorsement of the substitution/waiver petition.
3. *[Petitions for AA-T and AS-T degrees only]:* Submit the petition to Articulation.
4. Submit the petition to the Chairperson of the department offering the course for which the substitution/waiver is requested (PART B). In some cases, this may also be the department offering the degree.
5. Submit the petition to the Chairperson of the department offering the program of study for which you are applying. For programs of study within Liberal Studies or General Education, obtain the signature of the Dean, Educational Programs (SS-260) in lieu of Department Chair signature.
6. **SUBMIT THE COMPLETED PETITION TO ADMISSIONS & RECORDS, SS-110**
INCOMPLETE PETITIONS WILL NOT BE PROCESSED.

All substitution and waiver approvals by Department Chairs are subject to Department, District, State and Accreditation policies and standards.

To petition Information Competency Requirements (Area F), use the Information Competency Petition Form at <http://sbcc.edu/informationcompetency/>.



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STEP 1: COMPLETED BY STUDENT

Student ID K _____ Email _____@pipeline.sbcc.edu

Last Name _____ First Name _____

Substitution Request Note: If substituting coursework from another college, **official** transcripts must be on file at SBCC.

PART A					PART B	
Substitute Course & Number	Units	Semester or Quarter	Term	Grade	College	For SBCC Course/Requirement

Waiver Request Note: Students must complete a minimum of 18 semester or 27 quarter units in the major.

Waive _____ Reason _____

Waive _____ Reason _____

STEP 2: COMPLETED BY COUNSELOR*

Counselor: _____
Code: _____ Date: _____

Catalog Year: _____
e.g. 2015-2016

Degree Type: (Check all that apply to petition) AA-T AS-T AA AS Certificate Skill Comp Dept Award

Program of Study: _____

e.g. Health Information Technology. Use a separate petition for each program of study.

*Counselor verification of catalog rights is not an inferred nor explicit endorsement of petition.

STEP 3: COMPLETED BY ARTICULATION [Required for AA-T & AS-T Degrees only]

Signature of Articulation Officer *Date*

STEP 4: COMPLETED BY DEPARTMENT CHAIR(S)

PRINT Name of Department Chair offering COURSE (PART B) *Signature* *Date*

PRINT Name of Department Chair offering PROGRAM OF STUDY *Signature* *Date*

OFFICE USE ONLY: Approved Denied Exception Applied Date _____ Initials _____