Petition for Waiver/Substitution of Program Requirement

PLEASE FILL OUT THE TOP PORTION OF THIS FORM, HAVE YOUR ADVISOR READ IT AND SIGN IT, THEN TURN IT IN TO THE BIOLOGICAL SCIENCES OFFICE. YOU WILL BE NOTIFIED OF A DECISION.

Name:	UMBC Campus ID:	Date:
I would like to request a waiver or substituti	ion of the established program requi	rements for (check one):
BS in Biological Sciences BA in Biological Sciences BS in Bioinformatics & Computation BA in Biology Education	Minor in Biolog	ormatics
Program requirement to be waived or subs	tituted:	
Reason for the requested waiver or substitution Undergraduate Program Committee may reprocess):		
AS THIS STUDENT'S ASSIGNED ACADE OR SUBSTITUTION OF REQUIREMENTS	·	
Advisor's Signature:	Dat	te:
Approved as requested Approved, with the following conditi	ons/modifications to be applied:	
Denied, for the following reason(s):		
Signature, Program Director		Date:

Modified March 2019