

HUNTINGDON COLLEGE

Department of Evening Studies

W. JAMES SAMFORD, JR. SCHOOL FOR BUSINESS AND PROFESSIONAL STUDIES

1500 EAST FAIRVIEW AVENUE
MONTGOMERY, AL 36106-2148

OFFICE OF THE REGISTRAR
334/833-4532 / FAX 334/833-4313

PETITION FOR A WAIVER OF A GRADUATION REQUIREMENT

Instructions: Complete your portion of this form, attach appropriate documentation (e.g. syllabi, etc.), and return to the Office of the Registrar (1500 East Fairview Avenue, Montgomery, AL 36106 or by fax to 334/833-4313). Once the Office of the Registrar has received an outcome to your petition, you will be notified and your file will be updated to reflect this information. Please allow at least 10 business days for your petition to be processed from the date of receipt. For some petitions, a longer time frame may be necessary in order to make an informed decision.

Full Name _____ Last 4 digits of SSN _____

Permanent Address _____

Contact Phone number (____) _____ HC e-mail _____

Class to be waived: _____
Course Code Course Title Credits

Explanation for necessity of a waiver (please feel free to use separate sheet of paper if needed):

Description of any attached documentation concerning requested waiver course and reasoning as to how you will still fulfill the intent of the required class.

Signature: _____ Date: _____

Advisor notification and support of petition – it is the student’s responsibility to obtain this signature before forwarding the petition to the Office of the Registrar.

Advisor signature: _____ Date: _____

Internal use only below this line.

Received by: _____ Date received: _____

Approved

Denied

Provost’s Signature: _____ Date: _____

Original to Registrar’s Office

Copy to Advisor