



EASTERN KENTUCKY UNIVERSITY
COLLEGE EXCEPTION FORM

(Use the "Request for Exception to Academic Policy Form" for University exception)

College of: [] A&S [] B&T [] Education [] Health Sciences [] J&S [] Enrollment Mgt.

Name: _____ ID #: _____
Address: _____ Phone: _____
Major: _____
Total Hours Completed: _____ Catalog Yr: _____
Cum. GPA: _____ Term to be Applied: _____ Advisor: _____

TYPE OF EXCEPTION REQUESTED (CHECK ALL THAT APPLY)

- o Course Substitution: (attach additional sheet if needed)

_____ for _____
_____ for _____
_____ for _____

To Be Completed By College Processor
(pseudo)
(pseudo)
(pseudo)

- o Course Waivers: 1) _____ 2) _____
(waive this course) (waive this course)

- o Overload Request: Allow student to take _____ hrs.

- o Second or Subsequent Repeats: _____ (course(s) for which repeat is requested) _____ (term course will be repeated)

- o Pre-requisite waiver: _____ (Allow student to register for this course without meeting pre-req)

- o Major Restriction(s): _____

- o Class Restriction: Allow student to register for _____ (course or courses)

Other (explain in detail): _____

JUSTIFICATION FOR ABOVE REQUEST

SIGNATURES/DATES REQUIRED

Student _____ Date _____

Advisor _____ Date _____

College Dept. Chair _____ Date _____

College Dean or Assoc. Dean _____ Date _____

[] Recommend [] Not Recommend Comment: _____

[] Recommend [] Not Recommend Comment: _____

[] Approve [] Disapprove Comment: _____

DO NOT WRITE BELOW THIS LINE (OFFICE USE ONLY)

Date Processed: _____ Processed By: _____
Copied by Processor to (check all): [] Student [] College Office [] Advisor [] Registration Center (original copy)
Date Copies Sent to Above: _____