



REQUEST FOR MODIFICATION OF ACADEMIC REQUIREMENTS (For Undergraduate Programs)

Office of the Registrar / 200 West Kawili St. Hilo, HI 96720-4091 / Student Services Building, First Floor Rm E-101 / Phone: (808) 932-7447 / Fax: (808) 932-7448 / E-mail: uhhro@hawaii.edu

SECTION I: Student Information

Student Name: _____ Student ID: _____
Email: _____@hawaii.edu Phone: _____
Expected Graduation Semester: _____
Major/Minor/Certificate Modifying**: _____
(Include option(s), concentration and/or emphasis as appropriate)
Student Signature: _____ Date: _____

SECTION II: Course Information

Course Substitution:

Table with columns: Major, Minor, Cert, *GE, *Other, Course/Credit/Institution/Semester & Year, UHH Course/Requirement

Course Waiver:

Table with columns: Major, Minor, Cert, *GE, *Other, Specify Requirement, # of Credits

Course Justification:

SECTION III: Approvals

Print Name

Signature

Date

Faculty Advisor: _____
Program/Dept. Chair: _____
[] Major [] Minor [] Cert

**If modifying multiple degree requirements, approval is needed for each program area.

Program/Dept. Chair: _____
[] Major [] Minor [] Cert
Program/Dept. Chair: _____
[] Major [] Minor [] Cert

*If modifying General Education or other Graduation Requirements, approval is needed from the Dean.

- Approval is needed from the Writing Intensive Coordinator to modify a course for the Writing Intensive (WI) requirement.

WI Coordinator: _____
College Dean: _____
[] General Education [] Other Graduation Requirements

FOR OFFICE OF THE REGISTRAR USE ONLY:

SHADGMQ [] _____ VA [] *STAR NOTE* [] Date: _____ Initials: _____
*Email Sent