

**Integrative Geographic Information Science Doctoral Program
Academic Forms**

Course Waiver Request

Student's Name: _____ Date: _____

Requesting Waiver of:
Course (name and number): _____

Previous Course Taken: College or University: _____

Course Number and Title: _____

Number of Credit Hours Earned: _____

Grade Received: _____

Please Attach:

- (1) A copy of your transcript showing the grade received; and (2) A copy of either (a) the detailed course syllabus, or (b) a copy of the course catalog description and a letter from the course instructor documenting the topics covered, or (c) other approved documentation demonstrating the course content

Signatures: _____

Student: _____ (Signature and Date)

Academic Advisor: _____ (Signature and Date)

Course Waiver Request is: Approved Denied

IGERT Director _____ (Signature and Date)

Return Original Form to NCGIA Office, 301 Wilkeson Quad.
Student should retain a photocopy