



Student (*Last, First, MI*) _____

Palomar ID # _____ Social Security # _____

Mailing Address _____

City, State, Zip Code _____

Major at Palomar College _____

Catalog Year _____ Receiving Veteran's Benefits? Yes No

NOTE: Official transcripts must be on file with the Records Office for any substitution or equivalency requests from other institutions. A Course Outline or Syllabus may also be required for determination of acceptability.

Course Substitution or Equivalency Request

Substitution: Acceptable in lieu of a required course

Equivalency: Equal in meaning and scope to a required course

Department:
Mark **S** or **E** for
Substitution or
Equivalency

Course Requested (Subject and Catalog #)	Institution/College (Where completed)	Required Course (from AA/CA reqmts)	Department: Substitution or Equivalency
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Approved Comments: _____

Denied _____

Department Chair/Director Signature

Date

Course Waiver Request

Course Requested (Subject and Catalog #)	Reason for waiver:
_____	_____
_____	_____

Approved Comments: _____

Denied _____

Department Chair/Director Signature

Date