

FOOTHILL COLLEGE

Petition for Course Substitution or Waiver

Date:		Email:	
Name:		CWID No.:	
Address:			
Street Address			
City	State Zip Code		
Major:	Quarter:		Catalog Year*:
		*-	The year of the curriculum sheet you are following
THE FOLLOWING MUST BE ATTACHED TO THIS PETITION:			
1. Copy of a U.S. college transcript (including Foothill College) or a foreign evaluated transcript showing			
completion of the course.			
2. Course description and/or course syllabus and/or course outline			
I AM REQUESTING A SUBSTITUTION/WAVER FOR:			
GENERAL EDUCATION MAJOR CERTIFICATE OF ACHIEVEMENT			
Required course or area:			
Requested substitution:			
Explain your reason for requesting substitution/waiver: (use reverse side if necessary)			
SUBMISSION OF A PETITION DOES NOT GUARANTEE APPROVAL OF THE PETITION. It is the student's responsibility to retain a copy of this petition for use with graduation.			
Student Signature:			
Counselor Name Printed:			Ext.
Counselor Signature:			
FOR OFFICE USE ONLY			
DIVISION RECOMMENDATION:		-	ALUATIONS OFFICE:
APPROVED: Check one		Co	mments:
Course content is equivalent to F			
 Course content is not equivalent is approved as a substitution 	to FH course but		
DENIED, explain:			
☐ OTHER, explain:			Approved □ Denied □ Other
Instructor Signature	Date		
Div. Dean/GE Co-Chair Signature	Date	Sign	nature Date