Educational Psychology Ph.D. Program

APPLICATION FOR COURSE WAIVER

APPLICANT'S NAME _____
Last First MI

TITLE AND NUMBER OF WSU COURSE REQUESTED TO BE WAIVED: _____

_____

TITLE, DEPARTMENT, AND NUMBER OF COURSE CONSIDERED TO BE EQUIVALENT: _____

_____

_____

INSTITUTION WHERE COURSE WAS TAKEN: _____

INSTRUCTOR'S NAME: _____

DATE TAKEN: _____ COURSE GRADE: _____

1. Attach a copy of the course syllabus, including texts, required readings, course requirements, course activities, examinations, and other pertinent data.

2. Attach a description of the course, including basic objectives, methods used to achieve those objectives, and any other data which is not immediately apparent from the syllabus.

3. Outline the points of correspondence between the course requested to be substituted and the WSU course requested to be waived. Keep in mind that we are assessing equivalence and not total duplication of course content.

4. Two copies of the petition and related data should be given to the Graduate Coordinator and one copy to the student's advisor.