



Application for Course Waiver in College of Education (COE)

Student's Name: _____ WSU ID: _____

Course Prefix and Number of WSU Course Requested to be Waived: _____

Course Prefix and Number of Course Considered Equivalent: _____

Course Title of Course Considered to be Equivalent: _____

Institution Where Course was Taken: _____

Instructor's Name: _____

Date Taken: _____ Course Grade: _____

Advisors Name: _____

Advisor's Signature _____

What Course are you asking to Enroll (Course Prefix and Number): _____

Campus of Enrollment: _____ Class # or SLN: _____

- 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 or project that reflects the learning objectives that 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. An electronic copy of the Course Waiver Form and related documents must be emailed to COE Office of Graduate Studies (gradstudies@wsu.edu).
5. To ensure timely processing and course enrollment, waivers must be submitted on, or before, one month prior to start of term.
6. Approved course waivers are not considered as transfer credit and are not counted towards graduation requirements for a degree.

For COE Office of Graduate Studies use only

Date Processed by COE _____ Approved _____ Denied _____

Approved by COE officer _____
Signature of COE Officer