

**MARQUETTE UNIVERSITY  
J. WILLIAM & MARY DIEDERICH COLLEGE OF COMMUNICATION  
SUBSTITUTION / WAIVER REQUEST FORM**

**Directions:** Complete Section One. Take this form to your College of Communication adviser for a recommendation (Section Two). If you are requesting a substitution or waiver within a major or minor, the Department Chairperson of that major or minor must also provide a recommendation (Section Three). Return this form to the College Records Office (JH 120).

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**SECTION ONE: Student Request**

Name: \_\_\_\_\_ MUID: \_\_\_\_\_

Phone #: \_\_\_\_\_ E-mail: \_\_\_\_\_@marquette.edu

I request the following substitution or waiver (provide a brief explanation for request):

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\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

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**SECTION TWO: Adviser Recommendation**

I recommend request

I do not recommend request

\_\_\_\_\_  
Adviser Signature

\_\_\_\_\_  
Date

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**SECTION THREE: Chair Recommendation**

I recommend request

I do not recommend request

\_\_\_\_\_  
Chair Signature

\_\_\_\_\_  
Date

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**SECTION FOUR: Associate Dean**

I approve request

I do not approve request

\_\_\_\_\_  
Associate Dean's Signature

\_\_\_\_\_  
Date

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For Office Use: Override \_\_\_\_\_

Cc: Student