

Office of Academic Affairs & Compliance School of Continuing Studies Georgetown University 640 Massachusetts Ave., NW Washington, DC 20001 Fax: 202-784-7235 scsoaac@georgetown.edu

Major or Concentration Requirement Waiver Request Form

| | <u> </u> | - | |
|---|---|--|--|
| Name: | | | |
| Last | First | Middle | |
| GUID# | | Program: | |
| Phone: | | Email: | |
| Capstone course; the c 2. With the recommendat exclusively within that might be waived from could possibly be waive subject matter expertises. 3. The student must supply student's first semester. | udents <u>cannot be waived</u> from a redit number requirement; and ion of the student's Associate I major or concentration. For exthe "MPJO-501, Fundamentals red from the "MPRE-621, Four e on finance. It all documentation (see below of study. Waivers are not auto | any degree-specific requirements (such as the Ethics course the minimum cumulative GPA requirement of 3.00 or bet Dean, a student can be waived from a course that is require example, a Journalism student with an exceptional writing of Reporting and News Writing" course, or a Real Estate educations of Real Estate Finance" course with documentation with the waiver request to the program's Associate Dead omatic or guaranteed. | eter). ed portfolio e student on of a an during the |
| another course or cour 5. The waiver request for graduation. | ses to reach the program's cred | it number requirement. Academic Affairs Office to ensure the student's continued | |
| Course(s) to be Waived: | C Tild | | |
| Course Number | Course Title | | |
| | | | |
| Documentation for Waiver (such ertifications): | as writing samples; profession | al portfolio; completion of other non-GU academic course | ework or |
| Associate Dean's Name & Signa | ture | Date | |
| ssociate Dean of Academic Aft | fairs' Name & Signature | Date | |
| For interna | l use only - Date Received: | Date Processed: | |