

**University of Nebraska-Lincoln**  
**College of Agricultural Sciences and Natural Resources**  
**Substitution-Waiver Request Form**

Name \_\_\_\_\_ ID# \_\_\_\_\_ Date \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ E-mail \_\_\_\_\_ Graduation Date \_\_\_\_\_

Degree Program(s) \_\_\_\_\_ Option \_\_\_\_\_ Minor(s) \_\_\_\_\_

**Complete left side to request a waiver. Complete both sides to request a substitution.**

Degree Requirement Specific Requirement or Course Abbreviation and Number	Cr. Hrs.	Check if CASNR Requirement	Waiver Check if Waiver	Substitution Requested		
				Course Title	Transfer Institution (If applicable)	Cr. Hrs.
				Course Prefix and Number		
1.						
2.						
3.						
4.						

**Explanation and Justification** of request to be completed by student (attach additional documentation if necessary)

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Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

Adviser \_\_\_\_\_ Date \_\_\_\_\_  Recommend Approval  Recommend Denial

Explanation: \_\_\_\_\_

Dept. Faculty Rep. \_\_\_\_\_ Date \_\_\_\_\_  Recommend Approval  Recommend Denial

Explanation: \_\_\_\_\_

CASNR Curriculum Committee \_\_\_\_\_ Date \_\_\_\_\_  Approved  Denied

Explanation: \_\_\_\_\_