

Name		Degree	
Hope ID  Date  List your major(s)		<b>□ B.A.</b>	<ul><li>□ B.S.N.</li><li>□ B.M.U.</li></ul>
		□ <b>B.S.</b>	
		List your minor(s)	
List the specific major	r or minor and the requireme	nt listed on yo	ur degree evaluation
Substitute or waive the SUBSTITUTE  List the courses you ha	ne requirement?  ave taken, are currently taking, or plan	to take to count for	the above requirement.
Number of credits  Overall number of	empt from the requirement - no credit at to waive  f credits for major or minor the ourse(s) that will be used to make	same?	
□ No - NEW tota	al credits required for major or r	minor	
<ul><li>□ Recommended</li><li>□ Not Recommended</li></ul>	Advisor Signature	<u> </u>	Date
☐ Approved ☐ Denied	Chairperson Signature	<u> </u>	Date
If you are planning to te	each, you also need approval fro	om the Education	n Department:
☐ Approved ☐ Denied	Dr. Sara Hoeve, Director of Certifica	ntion	Date