
Brandeis University
The Heller School for Social Policy and Management

Petition for Waiver for Required Course

Name: _____ STUDENT ID#: 2 _____

Program: _____ Date: _____

I am requesting a waiver for the following course:

Course #: _____ Instructor: _____

Title: _____

I am requesting the waiver because:

I plan to use the following course as a substitute for the required course:

Department: _____

Course #: _____ Title: _____

If you agree to this waiver, please sign below:

Signature of Student

Signature of Course Instructor

Signature of Program Director

Signature of Assistant Director, Academic Affairs and Student Experience Date

PLEASE NOTE: No credit is granted for a waived course. Students must select a substitute course to complete the total number of required courses for the degree.

Please email to:

Welby Gonzalez, Assistant Director
Academic Affairs and Student Experience
wgonzalez@brandeis.edu