

Graduation Senior \_\_\_ Yes \_\_\_  
Select Term:  
Year:



**Coppin State University**

2500 W. North Avenue  
Baltimore, Maryland 21216

**OFFICE OF RECORDS AND REGISTRATION  
COURSE EXCEPTION**

STUDENT: \_\_\_\_\_ ID#: \_\_\_\_\_

MAJOR: \_\_\_\_\_ Classification: \_\_\_\_\_

Required Course: \_\_\_\_\_ Name of course \_\_\_\_\_ Credit Hour (S): \_\_\_\_\_

*Please check*

( ) SUBSTITUTION \_\_\_\_\_ CREDIT HOUR (S): \_\_\_\_\_

*Please circle:* Transfer course or CSU course

( ) WAIVE COURSE REQUIREMENT

JUSTIFICATION:

ATTACHMENTS \_\_\_\_\_

Required Course: \_\_\_\_\_ Name of course \_\_\_\_\_ Credit Hour (S): \_\_\_\_\_

*Please check*

( ) SUBSTITUTION \_\_\_\_\_ CREDIT HOUR (S): \_\_\_\_\_

*Please circle:* Transfer course or CSU course

( ) WAIVE COURSE REQUIREMENT

JUSTIFICATION:

ATTACHMENTS \_\_\_\_\_

*Please circle*

APPROVED/DISAPPROVED \_\_\_\_\_ DATE \_\_\_\_\_

DEPT. CHAIRPERSON

APPROVED/DISAPPROVED \_\_\_\_\_ DATE \_\_\_\_\_

AREA DEAN

APPROVED/DISAPPROVED \_\_\_\_\_ DATE \_\_\_\_\_

PROVOST