*If you are requesting a disability-related accommodation for course substitution/waiver, contact Disability Services and Programs for Students (DSPS) for consultation. To schedule an appointment to meet with a DSPS Specialist, please call (805) 730-4164 or visit SS-160.

1. Complete Step 1 of the petition. If substituting coursework from another college, **official** transcripts must be on file at SBCC.

2. Review the petition with an SBCC Academic Counselor to verify your catalog rights for the program requirements for which a substitution or waiver is being requested. **Note: Counselor verification of catalog rights is not an inferred or explicit endorsement of the substitution/waiver petition.**

3. *[Petitions for AA-T and AS-T degrees only]: Submit the petition to Articulation.*

4. Submit the petition to the Chairperson of the department offering the course for which the substitution is requested (PART B) or for which the waiver is requested. In some cases, this may also be the department offering the degree.

5. Submit the petition to the Chairperson of the department offering the program of study for which you are applying. For programs of study within Liberal Studies or General Education, obtain the signature of the Dean, Educational Programs (SS-260) in lieu of Department Chair signature.

6. **SUBMIT THE COMPLETED PETITION TO ADMISSIONS & RECORDS, SS-110 INCOMPLETE PETITIONS WILL NOT BE PROCESSED.**

All substitution and waiver approvals by Department Chairs are subject to Department, District, State and Accreditation policies and standards.

To petition Information Competency Requirements (Area F), use the Information Competency Petition Form at [http://sbcc.edu/informationcompetency/](http://sbcc.edu/informationcompetency/).
SUBSTITUTION/WAIVER PETITION OF GRADUATION REQUIREMENTS

If you are requesting a disability-related accommodation for course substitution/waiver, contact Disability Services and Programs for Students (DSPS) for consultation. To schedule an appointment to meet with a DSPS Specialist, please call (805) 730-4164 or visit SS-160.

### STEP 1: COMPLETED BY STUDENT

Student ID K____ ____ ____ ____ ____ ____ ____ Email ____________________________@pipeline.sbcc.edu

Last Name __________________________ First Name __________________________

**Substitution Request**  Note: If substituting coursework from another college, official transcripts must be on file at SBCC.

<table>
<thead>
<tr>
<th>Substitute Course &amp; Number</th>
<th>Units</th>
<th>Semester or Quarter</th>
<th>Term</th>
<th>Grade</th>
<th>College</th>
<th>For SBCC Course/Requirement</th>
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<table>
<thead>
<tr>
<th>Waiver Request</th>
<th>Reason</th>
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**Waiver Request**  Note: Students must complete a minimum of 18 semester or 27 quarter units in the major.

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<th>Waive</th>
<th>Reason</th>
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### STEP 2: COMPLETED BY COUNSELOR*

Catalog Year: __________________

  e.g. 2018-2019

**Degree Type:**  (Check all that apply to petition)  

- [ ] AA-T  
- [ ] AS-T  
- [ ] AA  
- [ ] AS  
- [ ] Certificate  
- [ ] Skill Comp  
- [ ] Dept Award

**Program of Study:**  

  e.g. Health Information Technology. Use a separate petition for each program of study.

  *Counselor verification of catalog rights is not an inferred nor explicit endorsement of petition.*

### STEP 3: COMPLETED BY ARTICULATION  [Required for AA-T & AS-T Degrees only]

**Signature of Articulation Officer**

  Date

### STEP 4: COMPLETED BY DEPARTMENT CHAIR(S)

**Name of Department Chair offering COURSE (PART B or Waiver)**

  Signature

  Date

**Name of Department Chair offering PROGRAM OF STUDY**

  Signature

  Date

**OFFICE USE ONLY:**  

- [ ] Approved  
- [ ] Denied  
- [ ] Exception Applied  

  Date ________________  

  Initials ______

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Rev. 1/31/2019