FORDHAM UNIVERSITY
THE JESUIT UNIVERSITY OF NEW YORK

Office of ACADEMIC RECORDS
WAIVER / SUBSTITUTION FORM

STUDENT NAME

FIDN:

SCHOOL/COLLEGE

CAMPUS:

CLASS OF:

WAIVERS

Waivers identify a course requirement from which the student is exempt.

*Course (s) being WAIVED: **Reason:**   **Core/Maj/Min/Conc**

SUBSTITUTIONS

Substitutions involve a course satisfied by an equivalent course completed at Fordham, Study Abroad or a transfer institution.

Fordham Course or DW Requirement being fulfilled: **Core/Maj/Min/Conc**   ***SUBSTITUTE Course:**   **Substitute Origin:**

AUTHORIZING SIGNATURE: **DEPARTMENT:**   **DATE**

The email button may not work with some browsers - if you experience difficulty please forward completed form to acadrecords@fordham.edu

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