



SIMMONS UNIVERSITY  
Office of the Registrar  
300 The Fenway, Boston, MA 02115  
Tel 617.521.2111 Fax 617-521.3144

## Major/Minor Requirement: Exemption Approval

Student Name: \_\_\_\_\_ Simmons I.D.: \_\_\_\_\_

E-mail Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

*Students are required to complete all major and/or minor requirements listed in the course catalog for their declared area of study. If a student cannot complete a requirement, they may seek approval from their department for alternative arrangements. Only with approval from the department chairperson may the student be exempt from certain requirements, complete alternative courses for the program, and be allowed to graduate from their intended major and or minor.*

### Terms of Exemption

Major(s) Impacted: \_\_\_\_\_

Minor(s) Impacted: \_\_\_\_\_

Anticipated Graduation Date: \_\_\_\_\_/\_\_\_\_\_  
Month Year

| Required Course | Alternative Fulfillment |
|-----------------|-------------------------|
|                 |                         |
|                 |                         |
|                 |                         |

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Adviser's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Department Chair Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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### FOR OFFICE USE ONLY

Date Received: \_\_\_\_\_ Initial: \_\_\_\_\_

#### **SPRO Comment:**

**[Date]: [Student Name] is exempt from completing [Required Course] requirement as per the department through alternative fulfillment with [Alternate Course]. [Initial]**

Processed by S. Hurd: \_\_\_\_\_ Date: \_\_\_\_\_