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: _____

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:_____