

**University of Cincinnati**  
**SCHOOL OF SOCIAL WORK**

**Course Waiver Request Form**

*A waiver of a required course will be granted only if you can demonstrate that you have knowledge of the course content. It must be approved by the **current instructor** of the course and the Associate Director. If the waiver is granted you will not have to take the course in question and may select an elective in its place. A waiver **does not** give you credit hours and you are still held responsible for completing the hours of credit that the course requires.*

\_\_\_\_\_ ( \_\_\_\_\_ ) requests a waiver for  
*student name student ID*

Course # \_\_\_\_\_ Title \_\_\_\_\_

Course(s) previously waived: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Reason for waiver request:*

*List courses or other work that you believe have duplicated the content of the course for which you are requesting the waiver.*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Approval:* \_\_\_\_\_  
*Course Instructor Date*

\_\_\_\_\_  
*Associate Director Date*