

Please use a separate form for each request

# Nyack College

## Modification of Program Request

*Please complete and return to Registrar*

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_

Student ID: \_\_\_\_\_ Major: \_\_\_\_\_

Level: Freshman Sophomore Junior Senior (Please circle one)

**Type of Request:** (check one)

\_\_\_ **A** - Substitution for a required course in the **core**  
{requires the signature of the department head of course **not** being taken}\*

\_\_\_ **B** - Substitution for a required course in the **major**  
{requires the signature of the department head of course **not** being taken}\*

\_\_\_ **C** - Substitution for a required course in a **concentration**  
{requires the signature of the department head of course **not** being taken}\*

\_\_\_ **D** - Count transferred course toward a required course  
{requires the signature of the department head of course **not** being taken}\*

\_\_\_ **E** - Take more than 20 credit hours

\_\_\_ **F** - Waive Prerequisite

\_\_\_ **G** - Other

**Specific Request:** \_\_\_\_\_

**Replacement Class Taken:** Semester \_\_\_\_\_

**Reason for Request:** \_\_\_\_\_

**Signatures needed:**

Approved      Not  
Approved      Approved      Date

\_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_ Faculty Advisor: \_\_\_\_\_ Required for **A B C D E F G**

\_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_ \*Department Head {of required course}: \_\_\_\_\_ Required for **A B C D G**  
*For **Interdisciplinary Studies** majors, the Department Head of the area of study must sign.*

\_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_ Dean of the School: \_\_\_\_\_ Required for **E G**

\_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_ Registrar: \_\_\_\_\_ Required for **A B C D E F G**

For Office: Date done in system \_\_\_\_\_ By \_\_\_\_\_