



LAS POSITAS COLLEGE DSPTS - General Education Course Substitution or Waiver

DIRECTIONS: Students who wish to request a substitution or waiver for a general education area **based on a verified disability** at Las Positas College must complete the following process:

1. Meet with a DSPTS counselor to complete the petition form.
2. Attach all relevant supporting documentation and verification of the related disability.
3. Attach unofficial transcripts and a Student Educational Plan to the petition.
4. Provide all documentation to the DSPTS Counselor to forward for processing.

Name (Last, First)	Student W Number
Phone Number	Zonemail Email Address
Program of Study (check one): <input type="checkbox"/> Associate Degree (AA or AS) <input type="checkbox"/> Associate Degree for Transfer (AA-T or AS-T)	
Las Positas College Major: _____	

If you are interested in transfer to a four-year institution, substitution/waiver of a general education requirement may not be approved by the transfer institution. This form does not guarantee waiver/substitution of GE coursework at other institutions.

<input type="checkbox"/> I Request to Waive the following GE Area: (ex. Mathematics Proficiency) _____ _____	<input type="checkbox"/> I Request to Substitute for the following GE Area: (ex. CSUGE area B4 – Math/Quantitative Reasoning) _____ Substituting Course (ex. MATH 40): _____ Units: _____ Course Title: _____ Name of Institution: _____ Semester/Year taken: _____
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Rationale for Substitution or Waiver:

Please provide clear and complete reason for your request. Justification may include a history of academic difficulty despite the utilization of available supports and resources. (If you need more space, you may attach additional documents).

Student Name (Print): _____	Student Signature: _____	Date: _____
Counselor Name (Print): _____	Counselor Signature: _____	Date: _____

FOR OFFICE USE ONLY

Counselor Comments:		
Dean of Student Service's Signature: _____	<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved	Date: _____
Processed by (A&R): _____	Date: _____	