



REGISTRAR'S OFFICE
98 BRIDGE STREET, HENNIKER, NH 03242
TEL# 603.428.2203 FAX# 603.428.2487 Email: registrarsoffice@nec.edu

SUBSTITUTION/WAIVER FORM

NAME	NEC ID#	NEC Box #
ADVISOR (Print Name) & NEC Box #	MAJOR	DATE
ANTICIPATED DATE OF GRADUATION		

I wish to make the following substitution for course(s) required in my major:

REQUIREMENT	SUBSTITUTION	REASON
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

I wish to have the following course(s) waived as part of the requirement(s) in my major:

REQUIREMENT	REASON
_____	_____
_____	_____
_____	_____
_____	_____

STUDENT'S SIGNATURE _____ **DATE** _____

I recommend the above substitution(s) and or waiver(s).

MAJOR FACULTY SIGNATURE #1	PRINT NAME	DATE _____
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MAJOR FACULTY SIGNATURE #2 (Must be Program Director if applicable)	PRINT NAME	DATE _____
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ADVISOR'S SIGNATURE	PRINT NAME & NEC BOX #	DATE _____
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REGISTRAR'S SIGNATURE	DATE _____
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Please **return completed** form to **The Registrar's Office** as soon as possible. 11-2014