



Department of Bioengineering

UNIVERSITY OF COLORADO
DENVER | ANSCHUTZ MEDICAL CAMPUS

Petition for a Core Class Waiver (MS)

*You are highly encouraged to submit this form one year prior to your planned graduation date keeping in mind that if the petition is not approved, you must complete the required core class to graduate. **You must schedule a separate meeting (and may be required to take an exam) with the course instructor to verify your knowledge/competency in the subject.***

The petition may be based on prior professional and/or academic experience or course work. If you plan to transfer/apply a different graduate course in place of the core required class, please fill out the Petition for substitution of a core class. Note that if a waiver is approved, additional credits must still be earned to meet the total credit hour requirements for your degree.

Course Instructor Review

The Course Instructor must sign this form before you submit your petition to the Director of Student Services.

Student Name: _____ Student ID: _____

Email: _____

Course Name: _____ Course #: _____

Clearly state your request and reason for your petition. Please provide supporting documents (transcripts, course syllabus, etc.) that will help the course instructor and Graduate Affairs Committee make an appropriate decision. Petitions with incomplete information will not be considered.

I have tested this student's knowledge and support their petition.

Course Instructor Name: _____

Course Instructor Signature: _____ Date: _____

Departmental Review

Approved Not Approved

Grad. Committee Chair Name: _____ Date: _____

Grad. Committee Chair Signature: _____