



University Honors College  
Honors Course Waiver Form

Student Name: \_\_\_\_\_ ID# \_\_\_\_\_

Semester: \_\_\_\_\_

Please answer the following questions:

- 1) What are the UCC courses that you need for the semester stated above?  
(If none, write none)

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

- 2) Of the current Honors course offerings, is there a course you would like to take if it was scheduled at different times? Which course? What time would be ideal?

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

Clearly state the reason for why you are unable to take an Honors Course during the semester stated above.

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

Student Signature \_\_\_\_\_

Date \_\_\_\_\_

Honors College Dean \_\_\_\_\_

Date \_\_\_\_\_

