



NMSU | DOÑA ANA COMMUNITY COLLEGE  
**SUBSTITUTION AND WAIVER FORM**

\_\_\_\_\_  
Student

\_\_\_\_\_  
ID#

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
Degree

\_\_\_\_\_  
Occupational Field

\_\_\_\_\_  
Catalog Year

\_\_\_\_\_  
Expected Graduation Date

Substitute			...for		
Prefix	No.	Class Title	Prefix	No.	Class Title
Rationale					

Waive		
Prefix	No.	Class Title
Rationale		

\_\_\_\_\_  
Advisor/Department Chair / Date

\_\_\_\_\_  
Division Dean / Date

\_\_\_\_\_  
Campus Academic Officer / Date

\_\_\_\_\_  
Campus Student Services Officer / Date

Distribution: Original to Student's Permanent File in Division's Office; Copy to Student; Copy to Program  
(02/07 B&I)