

ACADEMIC EXCEPTION REQUEST FORM 2023-2024

NOTE: This form may only be submitted by Faculty, Chairs or Deans through their Cabrini email account.

Name:		Student ID:	
Major:			
Faculty/Staff Men	nber Submitting Request:		
	Undergraduate	Core Requirement	
	Graduate	Major Requirement	
Substitution A	pproval: only for courses or	utside academic department. Chairs ma	y approve course
substitutions w	vithin their subject areas an	d should notify the Registrar's Office di	rectly.
Subject/ Co	ourse #:		
For Requi	romont:		
¬			
	•	why another course couldn't be substitu	
Requir	rement:		
	Reason:		
(NO	TE: 123 total credits are stil	I required for undergraduates and 30+ f	for graduates)
		4-credit (graduate) residency requirem	
Other			
Desc	ription:		
1	Reason:		
APPROVALS			
_		ur written approval in the email when y submitted by Faculty, Chairs or Deans	
All Deguests	A on domin A during		Data
All Requests Major Exception	Academic Advisor _		Date:
Request	Department Chair:		Date:
	Asst. Dean Center		
All Requests	for Student Success:		Date: