GRADUATION EXCEPTION REQUEST FORM

Name: ____________________________________________   ID: __________________________

Last                        First                                    Middle       (UHID or UH username, SSN)

MAJOR (Check and complete all that apply):

☐ Associate in Arts Degree Major:  Liberal Arts

☐ Associate in Science Degree Major: 1.______________________ 2.______________________

☐ Certificate of Achievement Major: 1.______________________ 2.______________________

Catalog year used: ___________

Reasons for course exceptions (enter number below and include additional information if necessary):

A. Course not offered in the semester the student graduates

B. Equivalent course completed (identify campus if other than Kapi`olani CC and include course description)

C. Graduation residency waiver (for courses completed outside Kapi`olani CC)

D. Other (eg. waive course -- include additional explanation below)

1. Reason Code:_____   Additional Info.______________________________________________________

Substitute __________________________________ for ______________________________________

Course Alpha & #/Title (and campus if other than KapCC) KAPCC Course Alpha & #/Title

2. Reason Code:_____   Additional Info.______________________________________________________

Substitute __________________________________ for ______________________________________

Course Alpha & #/Title (and campus if other than KapCC) KAPCC Course Alpha & #/Title

3. Reason Code:_____   Additional Info.______________________________________________________

Substitute __________________________________ for ______________________________________

Course Alpha & #/Title (and campus if other than KapCC) KAPCC Course Alpha & #/Title

4. Reason Code:_____   Additional Info.______________________________________________________

Substitute __________________________________ for ______________________________________

Course Alpha & #/Title (and campus if other than KapCC) KAPCC Course Alpha & #/Title

Initiated by Counselor:

Signature _______________________________  Print_________________________  Date_____________

☐ Approved  ☐ Not Approved by Dean:

Signature _______________________________  Print_________________________  Date_____________

For Office Use Only

KISC – Input by/date: _____________

01/06