

NONCREDIT CERTIFICATE OF COMPLETION

PETITION FOR WAIVER OF CERTIFICATE REQUIREMENT(S)

50 Frida Kahlo Way, Multi-Use Building (MUB) Rm. 150, San Francisco, CA 94112 Ph: (415) 452-7400 | Fax: (415) 452-5592 | nc_admit@ccsf.edu

General Catalogue Description of Waiver

The academic department offering the certificate may waive some requirements for the Noncredit Certificate of Completion. A petition must be signed by the Department Chairperson (or designee) and filed in the Noncredit Admissions and Records Office. The requirements for the Certificate of Completion have been established by the faculty and administration and approved by the Governing Board. The Noncredit Admissions and Records Office does not have the authority to change or waive any of the requirements.

STUDENT:					
		First MIDate:			
Name of Certi	ficate:				
Required Course(s)	Required Grade	Required Hours	Reason for Waiver Request	Supporting Documentation	Dept. Chai initials authorizing individual course waiver(s)
		·			
Check appropria		pprove this	petition to waive all of the above c	ertificate requirer	nent(s).
DATE: Department Chairperson/Designee Signature				Title (if not Chairperson)	
		Departmen	nt Chairperson/Designee Name (please print)	Program	
eviewed and logged	l by Noncredit	t Admissions a	and Records		

Staff signature