



**NONCREDIT CERTIFICATE OF COMPLETION
PETITION FOR WAIVER OF CERTIFICATE
REQUIREMENT(S)** 50 Frida Kahlo Way, SSC 1124, 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: _____ **ID#:** _____
Last First MI

Student Signature: _____ **Date:** _____

Name of Certificate: _____

Required Course(s)	Required Grade	Required Hours	Reason for Waiver Request	Supporting Documentation	Dept. Chair initials authorizing individual course waiver(s)

Check appropriate box:

I () approve () disapprove this petition to waive all of the above certificate requirement(s).

DATE: _____
Department Chairperson/Designee Signature Title (if not Chairperson)

Department Chairperson/Designee Name (please print) Program

Reviewed and logged by Noncredit Admissions and Records _____
Staff signature Date