



DARS Exception Request

Student Name: _____

Student OHIO Email Address: _____

Degree Program/Code: _____

Department/School: _____

Select Exception Type:

Course Addition

Course Substitution

Course Removal

Requirement Waiver

DARs Category

DARs Sub-Category

Course Substitutions, or Additions (course(s) needing to be added to or moved on DARs)

Course/Requirement Being Replaced, Waived, or Removed (current Course(s)/Requirement(s) on DARs)

Other Notes:

Advisor Signature

Date

Graduate Chair Signature