LSP Exception/Waiver
Request Form

DePaul
UNIVERSITY
COLLEGE OF LIBERAL ARTS
AND SOCIAL SCIENCES

Who is making this LSP exception request: chose one (1) below

Student   Advisor   Staff

Student Full Name:

Student ID Number:

@depaul.edu email address:

Advisor Name:

Advisor DePaul Email:

Home college: chose one (1) below

BUS   CDM   CSH   CMN   COE   LAS   SOM   SCPS   TTS

Major(s):

LSP Area for request: select all that apply

CQ   FPS   FYW   QR   LSP 200   EL   CAP

AL   HI   MC-CR   MC-SR   PI   RD   SCBI   SI-LAB   SI-SWK

Course(s) ID for request (e.g. PHL 100):
A description of the request:*

* If this request comes from an advisor/staff, please state the reason you are submitting the request on behalf of the student. (These requests include one-offs and, for returning students, groups of old LSP or pre-LSP program courses.)

Please provide Course description (URL) for non-DePaul courses:

Please Attach Syllabus for DePaul and non-DePaul course(s) in email request