



Standing Substitution, Exception or Waiver Form

This form is used by authorized ARSC Faculty to articulate standing substitutions or exceptions, clarify catalog requirements, and approve lists of courses to satisfy specific degree requirements. **Please submit completed forms to arsccert@uark.edu.**

Department Name: _____

Will this issue be addressed in the next edition of the catalog? By submitting this form, the department agrees to alleviate the need for this addendum in future catalog years by submitting formal catalog revisions. Failure to do so will negate this form. **Yes** **No**

Program Name, Plan Code, and Catalog Year(s) [*Example – Bachelor of Arts in History, HISTBA, 2019-20 & 2020-21*]:

Description of Clarification or Modification (use second page if needed):

Faculty Approval:

Signature: _____ Print: _____ Date: _____

Assistant Dean Approval:

Signature: _____ Print: _____ Date: _____



UNIVERSITY OF
ARKANSAS

J. William Fulbright
College of Arts & Sciences

Description of Clarification or Modification (continued):