UW-Madison Tuition Waiver Request Form

Independent Learning - UW-Extension Course

Student Name:						
Campus ID:						
Academic Career (circle one): Undergraduate			Graduate	Professional	Special	
College or School:						
I am requesting to c	arry (course nan	ne/number)				
for (number)	credits throu	gh Independent	Learning for (i	term)	·	
Student's signature				Date		
Fo	r Official Us	e - To Be Co	mpleted b	y Dean's Offi	ce Staff	
This course may	be taken concurre	ently with (numb	<i>ber)</i> cre	dits in residence or	n UW-Madison campus.	
The course	☐ will	☐ will no	ot	count for degree credit.		
The course	☐ will	☐ will no	ot	count for senior residency credit.		
The course	☐ will	☐ will no	ot	count for major residency credit.		
Additional school	l/college conting	encies (e.g., cou	rse completion	ı date):		
Based upon current enrollment, separate fees				☐ need not be paid.☐ are the responsibility of the student.		
School/College D	ean's Approval:					
Name:						
Date:						

The student is responsible for making three copies of this form. Original to UW Learning Innovations, copies to school/college student file and to student. Form date: September, 2006.

Important notes: The UW-Extension transcript date may determine the effective UW-Madison graduation date and semester. Students are responsible for monitoring UW-Madison graduation deadlines. Students must allow a sufficient period of time for evaluating course work and posting grades to the official UW-Extension transcript. Confer with your dean's office regarding these issues. To request that an official transcript be sent to UW-Madison Undergraduate Admissions, send the form found in each course guide, along with fee, to UW-Extension Student Records, Pyle Center, 702 Langdon Street, Room 139, 608-262-1953.