



Term \_\_\_\_\_ **Description of Special Problems** \_\_\_\_\_ Requested Date \_\_\_\_\_

Subject \_\_\_\_\_ Catalog Number \_\_\_\_\_ Section \_\_\_\_\_ Hours \_\_\_\_\_ Department \_\_\_\_\_ Instructor's Name \_\_\_\_\_ Instructor's ID \_\_\_\_\_

Session \_\_\_\_\_ UAConnect Number \_\_\_\_\_ Student's Name \_\_\_\_\_ College \_\_\_\_\_ Student's ID \_\_\_\_\_

**Description of Special Problem:** (include information regarding required student activities)

\_\_\_\_\_

Received By: \_\_\_\_\_  
Date: \_\_\_\_\_

Dean's Office Use Only  
Processed By: \_\_\_\_\_  
Date: \_\_\_\_\_

**Method of Evaluation of Student Progress and Assignment of Grades:** (include information regarding any quizzes, exams, reports or presentations required, how each will be graded, and how a final grade is calculated)

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Instructor Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Department Head Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Dean's Office Approval

\_\_\_\_\_  
Date

**Please return this form to the Waldrip Student Center (AGRI 205) prior to the start of the requested term.**