

School of Teacher Education
San Diego State University
San Diego, CA 92182-1153
EBA 255 (619) 594-6131

REQUEST FOR ADJUSTMENT OF CREDENTIAL REQUIREMENTS

Print name and mailing address

Date_____

Last First Middle/Maiden

Credential_____

Street and #

Red ID: _____

City State Zip

Former name (s)_____

This form is to be used by a credential candidate requesting an exception to the requirement for a particular credential. Submit this petition with supplemental data attached to the School of Teacher Education, EBA 255 for final action. Data sought to justify the waiver or submission of coursework might include verification of recent work experience, copies of course catalog description (s) and/or syllabi, and photocopies of transcripts verifying grades (do not submit originals; these will not be returned). Candidates will receive a copy of the waiver or course substitution request with the final recommendation in the mail. In instances where requests have been denied, candidates may resubmit requests with additional information.

EXCEPTION REQUESTED _____

JUSTIFICATION FOR REQUEST _____

APPROVE____ DENY_____

APPROVE____ DENY_____

Dept./Prog. Coordinator Signature

Authorized Signature/CTC Validation

Date_____

Date_____

Comments: