

To: **Degree Checking**

Through: James L. Otter, Chairman  
Department of Engineering Technology

Student name: \_\_\_\_\_ ID Number: \_\_\_\_\_

Please allow course (s): \_\_\_\_\_

\_\_\_\_\_

To substitute for course (s): \_\_\_\_\_

\_\_\_\_\_

To satisfy requirements for degree in: \_\_\_\_\_

\_\_\_\_\_

(Justification, if required): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Student's Signature

date: \_\_\_\_\_

\_\_\_\_\_  
Advisor's Approval

date: \_\_\_\_\_

\_\_\_\_\_  
James Otter  
Chairperson, Engineering Technology

date: \_\_\_\_\_