

**Western Michigan University - Department of Psychology**  
**Petition of Waiver, Substitution, Transfer, Proposal, and Comp Exam**

**Name:** \_\_\_\_\_ **WIN:** \_\_\_\_\_

**Program:** \_\_\_\_\_ **Level:** \_\_\_\_\_ **Date:** \_\_\_\_\_

The following academic activity was judged to be equivalent to a competency within the Masters / Doctoral program.

**Course/Area/Proposal:** \_\_\_\_\_  
 Program of Study Area or Course (Example: Comp, Thesis, or PSY 6100)

**Proposed Activity /Previous Coursework (Syllabus/course description must be attached)**

University: \_\_\_\_\_ Date/Semester Completed: \_\_\_\_\_

**Course Number & Title:** \_\_\_\_\_

Course Level:  Undergraduate  Graduate

Text: \_\_\_\_\_ Cr Hrs: \_\_\_\_\_ Grade: \_\_\_\_\_

Instructor \_\_\_\_\_

Description of Equivalent Activity: \_\_\_\_\_

\_\_\_\_\_

**NON-THESIS COURSES**

**Instructor of WMU PSY Petitioned Course\***

\*Required for petitions to accept a non-elective courses from another department or university.

\_\_\_\_\_

Accept  Reject\* Date \_\_\_\_\_

**Advisor** \_\_\_\_\_

Accept  Reject\* Date \_\_\_\_\_

**Program Chair** \_\_\_\_\_

Accept  Reject\* Date \_\_\_\_\_

\*If rejected please use comments to indicate if additional steps or items are needed for potential re-evaluation.

**THESIS, PROPOSAL, AND COMPETENCY EXAM**

Uses: Thesis transfer or defense pass/fail, proposal defense, and competency exam substitution or written exam results. Requires 3 Internal Committee Members; 1 additional internal or external person for comp.

Advisor Signature: \_\_\_\_\_

Pass/Accept  Fail/Reject\* Date \_\_\_\_\_

Signature: \_\_\_\_\_

Pass/Accept  Fail/Reject\* Date \_\_\_\_\_

Signature: \_\_\_\_\_

Pass/Accept  Fail/Reject\* Date \_\_\_\_\_

Signature: \_\_\_\_\_

Pass/Accept  Fail/Reject\* Date \_\_\_\_\_

\*If comp/defense is failed please use comments to indicate which parts must be retaken.

Comments: \_\_\_\_\_

\_\_\_\_\_