

Degree Works / CAPP Adjustment Form

*Incomplete forms will not be
processed.*

For Office Use Only	
Received:	_____
Processed:	_____
Scanned:	_____

Date: _____

Major: _____

Student Name: _____

Concentration: _____

A Number: _____

Degree Works or Capp: **Select One**

Catalog Year: _____

College: **Select One**

All adjustments are college, program, and major specific, and are subject to change

UAH COURSE REQUIREMENT	BLOCK/AREA (GER, MAJ, MNR, CORE, ELE, PREPROF)	ALTERNATE/SUBSTITUTE COURSE USED	INSTITUTION (please list if alternate course is transfer credit)	COMMENTS/NOTES

Notes:

For additional
comments and/or
waivers

Approval Signatures:

-E-mail attachment- Type name as signature

-College Rules: Dean's approval required

-Printed copy- Signatures required

-University Rules: Associate Provost's approval required

Advisor (Required)

Dean

Department Chair (Required)

Associate Provost