

WESTMINSTER CHOIR COLLEGE

ENSEMBLE WAIVER FORM

This form is required of all students requesting waiver from ensemble requirements. Please note that this request will not be considered if the student has any remaining credits, recitals, or proficiencies beyond the semester(s) of the waiver.

Today's Date: _____

STUDENT INFORMATION

Full Name: _____

Academic Adviser: _____

Major: _____

ENTRANCE INFORMATION

Were you a transfer student?

☐ No ☐ Yes, I transferred in with _____ credits
(amount)

Did you enter WCC with AP credits?

☐ No ☐ Yes, I entered with _____ AP credits
(amount)

What was your placement in your first semester:

☐ Chapel Choir ☐ Schola Cantorum ☐ Symphonic Choir

REQUEST

How many semesters are you requesting a waiver? *Please list actual semesters (i.e. F19, S20)*

Will you have completed all other requirements for graduation (including recital, degree course work, etc.)? ☐ Yes ☐ No

What is your reason for this waiver?

Please submit form to the Director of Choral Activities with a copy of your transcript.