REQUEST FOR LANGUAGE WAIVER TO MEET
INTERNATIONAL STUDIES MAJOR LANGUAGE PROFICIENCY REQUIREMENT

Date: 
Name: 
Phone: 
UCSD Email Address: 
PID: 

I request to have my language requirement waived because I attended high school (grades 9, 10, 11, or 12) outside of the United States.

High School: ________________________________

Country: ________________________________

Language of Instruction: ________________________________

I verify that I attended high school outside of the United States and that courses were taught in a language other than English.

There is no unit credit for this waiver.

Student Signature: ________________________________

FOR OFFICIAL USE ONLY

ISP Staff Signature: ________________________________ Date: ________________

☐ ISIS ☐ High School Transcript ☐ Other: ________________________________