COURSE SUBSTITUTION REQUEST



Complete a separate form for EACH substitution request.

| Studen | t's Name: _ | | | | |
|---|---------------|---|------------------------------|----------------------|-------------------|
| ID#: | | Antici | Anticipated Graduation Date: | | |
| Acader | nic Progran | n/Major: | Minor: | | |
| | rm is to req | uest approval of the course in Box | A to substitute for the | course/requiremen | t in Box B. |
| | Course # | • | Term/Year | Taken At | Grade |
| D D (| | Short of South | | | |
| | Course # | stituted for): Course Title | | | |
| | | | | | |
| What is | ourse in Bo | or Gen Ed requirement is this substance a substitution is needed? x A also fulfilling any other requiren | nent(s) in your degree p | rogram? If so, expla | |
| | | ot. chair and then dean for review. If the Box r a General Education requirement, the cha | | | or chair and dean |
| | | D BY DEPARTMENT CHAIR(S) ution needed? | | | |
| Which | department | program learning outcome does it | fulfill? | | |
| Approv | ral Signature | e: Department Chair of the requirem | nent in Box B | Date | |
| Signature: Dean of the requirement in Box B | | | | | |
| Approv | red □ Der | nied Dean's Comments | | | |

Submit completed and signed form to: