|  |  |  |  |
| --- | --- | --- | --- |
| Name of Student: |  | Student ID Number: |  |
| Graduation Term: | Fall Spring Summer | Graduation Year: |  |



Request for Course Substitution

Has approval to substitute the following course(s) in meeting the requirements for:

Certificate of Completion Program (Major):

Certificate Program Program (Major):

Diploma Program (Major):

Associate in Applied Science Program

Program (Major):      Subplan:

Associate of Arts Subplan:

Associate of Science Subplan:

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  |  |  | | --- | --- | --- | --- | | Prefix | Course # | Title | Credits |   Required Course #1:  Program Requirement  General Education  Substitute Course:   |  |  |  |  | | --- | --- | --- | --- | | Prefix | Course # | Title | Credits |   Justification for Substitution: |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  |  |  | | --- | --- | --- | --- | | Prefix | Course # | Title | Credits |   Required Course #2:  Program Requirement  General Education  Substitute Course:   |  |  |  |  | | --- | --- | --- | --- | | Prefix | Course # | Title | Credits |   Justification for Substitution: |

Advisor (Signature) Date

Registrar (Signature) Date

Associate Dean for Academic and Students Affairs (Signature) Date

**Make one copy for student services offices. Return original to advisor**