

REQUEST FOR COURSE SUBSTITUTION

INSTRUCTIONS:

- Please submit at least three weeks prior to the start of a term/ session.
- Review the course requirements for your major or program.
- Identify a comparable course that you would like to use in substitution of a required course.
- Submit to the Office of Academic & Student Support Services and allow two to three weeks for the request to be processed.

PART I. STUDENT INFORMATION

Student name: _____
Last (Family name)
First (Given name)
Middle /Maiden

Mailing address: _____
Street
City
State
Zip code

Student ID: 000-_____ Email address: _____

Primary telephone number: _____ Current Program/Major: _____

Term for request: Fall Winter Spring Summer Session 1 Session 2 Year: _____

PART II. REQUEST FOR COURSE SUBSTITUTION

	Course #	Course Title	# of Credits
Required Course			
Substitution course			

If substitution course is not a College of Professional Studies course, please attach a course description/syllabus.

Name of institution: _____ Intended date of enrollment: _____

Please provide a brief (one-paragraph) rationale for requesting the substitution.

Student signature

Date

FOR OFFICE USE ONLY

Date assigned: _____ Assigned to: _____

Signature: _____ Date complete: _____ Petition: Accepted Denied

Comments: