



Course Substitution Request

Student's Name: _____

Student ID#: _____

Major/Minor: _____

Course Substitution Policy

The substitution of a course requirement may be approved under the following circumstances:

- The student completed another course which resulted in similar learning outcomes as required from the course to be substituted or,
- The course is no longer offered or will not be offered in time to be completed by the student before the student's graduation and,
- It is possible for the student to take another course which will result in similar learning outcomes as required from the one to be substituted.

A Course Substitution is being requested to meet the following requirement:

Major Minor Concentration Gen Ed Pre-Req (graduate only)

*check all that apply

Required Course:

Course Prefix and Number

Course Title

Number of credits

Proposed Substitute Course:

Course Prefix and Number

Course Title

Number of credits

Syllabus for the proposed substituted course has been reviewed for equivalency.

Briefly explain circumstances that justify a substitution.

Additional information to support request, If applicable.

Approved by: _____
Advisor

Date: _____

Approved by: _____
Program Director/Department Chair

Date: _____

Approved by: _____
Dean

Date: _____

Registrar's Office

Date Received for processing: _____

Date processed: _____