



# OFFICE OF THE REGISTRAR

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## Course Substitution Request Form

This form is for those who wish to substitute a course requirement in their degree plan. Please make sure all items and signatures have been completed. Incomplete forms will not be accepted.

**PERSONAL INFORMATION:**

FIRST NAME	MIDDLE NAME	LAST NAME	LAST 4 DIGITS OF SSN
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MAJOR	MINOR(IF APPLICABLE)	CATALOGUE YEAR
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**SUBSTITUTION INFORMATION:**

REQUIRED COURSE NUMBER	REQUIRED COURSE NAME	MAJOR   MINOR   GEN. CORE REQUIREMENT AREA (PLEASE CIRCLE ONE)
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SUBSTITUTE COURSE NUMBER	SUBSTITUTE COURSE NAME
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**REASON FOR SUBSTITUTION:**

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STUDENT SIGNATURE	DATE
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PROCESS	SIGNATURE/DATE
FACULTY ADVISOR: APPROVAL	
DIVISIONAL CHAIR: APPROVAL	
REGISTRAR: RECEIPT OF FORM	
REGISTRAR: STUDENT INFORMATION UPDATED	