COURSE SUBSTITUTION/ADDITION FORM

Student’s Name: ________________________________________ Student ID: __________________

Student’s Major: _______________________________________________________________________

Course Substitution #1

Deleted Course (Number and Title): ______________________________________________________

Added Course (Number and Title): _______________________________________________________ 

Course Substitution #2

Deleted Course (Number and Title): ______________________________________________________

Added Course (Number and Title): _______________________________________________________ 

Course Substitution #3

Deleted Course (Number and Title): ______________________________________________________

Added Course (Number and Title): _______________________________________________________ 

Reasoning:
_____________________________________
_____________________________________
_____________________________________

Student’s Signature: ____________________________________________ Date: ________________

Advisor’s Signature: ____________________________________________ Date: ________________

Department Chair’s Signature: ________________________________ Date: ________________

Division Chair’s Signature: ________________________________ Date: ________________

Registrar’s Signature: ________________________________ Date: ________________

Note: Signature sequence indicates routing. Please print or type - make sure all copies are legible.