

REQUEST FOR COURSE SUBSTITUTION

TO: REGISTRAR

STUDENT ID \_\_\_\_\_

\_\_\_\_\_ requests that the following course:  
(student's printed name)

Prefix & No.	Course Title	Hours Credit
_____	_____	_____

required for \_\_\_\_\_ be met by  
(major/minor/specialization)

substitution of the following course(s):

Prefix & No.	Course Title	Hours Credit
_____	_____	_____
_____	_____	_____

Requested substitution coursework is from: \_\_\_\_\_ DSU  
\_\_\_\_\_ Another School: \_\_\_\_\_

Student's Catalog Year \_\_\_\_\_

Justification for proposed substitution: (Attach additional documentation as necessary)

Signatures (in signature order):

Student: \_\_\_\_\_ Date \_\_\_\_\_  
(Signature)

	Recommended Action	Date
Advisor: _____ COMMENTS:	Approve	_____
	Disapprove	
Dean: _____ (required course) COMMENTS:	Approve	_____
	Disapprove	
Dean: _____ (student's major/minor/specialization listed above) COMMENTS:	Approve	_____
	Disapprove	