



Office of the Registrar
Warren Hall

REQUEST FOR COURSE SUBSTITUTION OF DEGREE REQUIREMENTS

This substitution, if granted, only applies to the current major and will not apply toward a second degree.

Student Name: _____ Banner Student ID#: _____

Mailing Address: _____

Major: _____ Catalog Year: _____

For Division Chair Use Only:

Required Course: _____ Course Requested: _____

Justification for Request: _____

Division Chair Signature: _____ Date: _____

Completed forms should be submitted to the Registrar's Office for Processing.

FOR REGISTRAR'S OFFICE USE ONLY

Date Processed: _____

Initials: _____

Copy to Financial Aid: _____